دليل مقدمي الخدمات

Medi-Cal

San Diego مقاطعة | August 2025

blue california

Promise Health Plan

Medi_24_325_SD_AR_012425

blue california
Promise Health Plan

LANGUAGE ASSISTANCE NOTICE

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

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

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

ឃ្លាសំគាល់ភាសាខ្មែរ (Cambodian) ចំណាំ៖ បើសិនអ្នកត្រូវការជំនួយ ជាភាសារបស់អ្នក សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរប្រៃលេ សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរពុម្ពធំៗ ក៏មានដែរ។ ទូរស័ព្ទមកលេខ 1-855-699-5557 (TTY: 711)។ សេវាទាំងនេះមិនគិតថ្លៃទេ។

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

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

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

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

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

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

ແທກໄລພາສາລາວ (Laotian) ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

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

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

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

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

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

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

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

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

جدول المحتويات

A. المقدمة 6
إشعار عدم التمييز 9
كيفية تقديم تظلم 9
شبكة مقدِّمي خدمات Blue Shield Promise 11
مؤشر إمكانية الوصول المادي لدليل مقدِّم الخدمة 12
توضيح رمز إمكانية الوصول 13
كيفية قراءة قائمة مقدِّم الخدمة 14
الوصول إلى معايير الرعاية في الوقت المناسب 15
B. عيادات الصحة المؤهلة فيدراليًا 27
C. شبكة مقدمي الرعاية الأولية 58
D. شبكة مقدمي الخدمات من الأطباء المتخصصين 762
E. شبكة المستشفيات 1689
F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF) 1695
G. الخدمات المجتمعية للبالغين (CBAS) - خدمات الرعاية النهارية للبالغين 1700
H. خدمات الدعم المنزلي في المقاطعة (IHSS) 1704
I. مقدمو الخدمات الصحية السلوكية 1705
J. مقدمي خدمات النظر 1783
K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة) 1916
L. مراكز الرعاية العاجلة 1944
M. فهرس الرعاية الأولية 1987

A. مقدمة

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

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

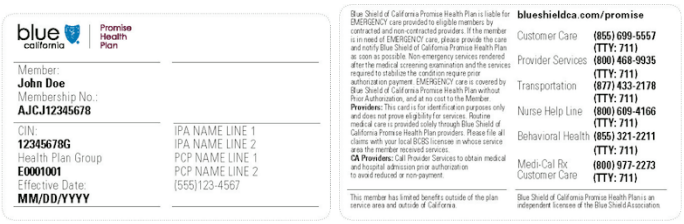
تغيير مقدم الرعاية الأولية (PCP) المسؤول عنك

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

بصفتك عضوًا في Blue Shield of California Promise Health Plan، سوف تحصل على بطاقة تعريف للعضوية مثل البطاقة المصورة في هذه الصفحة. وسوف تحتاج إلى إظهار هذه البطاقة التعريفية في كل مرة تقوم فيها بزيارة الطبيب، أو عند اللجوء إلى قسم الطوارئ، أو عند زيارة طبيب العيون الخاص بك. احتفظ بهذه البطاقة معك في جميع الأوقات.

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

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



بطاقة Blue Shield التعريفية (BIC)

الخدمات الصيدلية من خلال Medi-Cal Rx

DHCS) Department of Health Care Services)، قسم خدمات الرعاية الصحية) يدير الخدمات الصيدلية لأعضاء Medi-Cal. بالنسبة للخدمات الصيدلية، يمكنك الاتصال بخط مركز اتصال Medi-Cal Rx 1-800-977-2273 على مدار أربع وعشرين ساعة طوال أيام الأسبوع، أو اتصل بـ TTY على رقم 711، من الإثنين إلى الجمعة، من الساعة 8 صباحًا حتى 5 مساءً.

تقبل معظم الصيدليات بـ Medi-Cal Rx. يمكنك الاتصال على خط مساعدة أعضاء Medi-Cal على الرقم (1-800-541-5555، TTY 1-800-430-7077) للاستفسار عما إذا كانت الصيدلية التي تتعامل معها تقبل بـ Medi Cal Rx. إذا احتجت إلى المساعدة في البحث عن صيدلية، استخدم أداة البحث عن صيدليات Medi-Cal Rx عبر الإنترنت على الموقع الإلكتروني: **www.Medi-CalRx.dhcs.ca.gov** أو اتصل على خط مركز الاتصال الخاص بـ Medi-Cal Rx على الرقم 1-800-977-2273.

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني **blueshieldca.com/promise/medi-cal**. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

كيفية استخدام هذا الدليل

يمكنك استخدام دليل مقدمي الخدمات هذا لاختيار طبيب PCP المتعاقد مع Blue Shield Promise. يتم إدراج أسماء أطباء PCP، مع مقدِّمي الخدمات المتخصصين والمستشفيات ومقدمي الدعم الآخرين، بحسب الترتيب الأبجدي لاسم المدينة. ستجد في قسم "شبكة مقدمي الخدمة Blue Shield Promise" معلومات حول كيفية قراءة الأقسام المدرجة لمقدِّم الخدمة والعثور على المعلومات المهمة التي تحتاج إلى معرفتها عن كل مقدِّم خدمة.

معلومات مهمة عن قوائم الدليل

يتم تحديث دليل مقدمي الخدمات هذا وفقًا للتاريخ المدرج على الغلاف الأمامي. قد تتم إضافة أو إزالة بعض أطباء PCP بعد طباعة هذا الدليل. ولا يمكننا ضمان استقبال أعضاء جدد من قبل كل طبيب PCP. للحصول على آخر المعلومات حول بيانات أطباء PCP في منطقتك، يمكنك زيارة الرابط **blueshieldca.com/promise** أو الاتصال بخدمة عملاء Blue Shield Promise على الرقم المجاني [TTY: 711] 5557-699 (855) . أو عن طريق زيارة مكتبنا من الاثنين إلى الجمعة من الساعة 8 صباحًا حتى 6 مساءً. ويمكنك الحضور دون موعد مسبق لدينا طاقم عمل يتحدث لغتك. كما يمكنك أيضًا زيارة موقعنا الإلكتروني **blueshieldca.com/promise**.

معلومات وإفصاحات مهمة أخرى

قد لا يوفر بعض مقدمي الخدمات والمستشفيات واحدة أو أكثر من الخدمات التالية التي قد تشملها الخطة الصحية الخاصة بك التي ربما قد تحتاجها مثل تنظيم الأسرة أو تنظيم النسل، بما في ذلك حالات طوارئ تنظيم النسل، أو الإخصاء بما في ذلك عملية ربط الأنابيب وقت المخاض والولادة أو علاج العقم أو الإجهاض.

خدمة عملاء Blue Shield Promise على الرقم 5557-699 (855) للتأكد من أنه يمكنك الحصول على خدمات الرعاية الصحية التي تحتاج إليها.

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

قد تحتاج إلى ترخيص أو إحالة للوصول إلى بعض مقدمي الخدمات. توفر Blue Shield Promise الوصول الكامل والمتساوي إلى الخدمات المشمولة، بما في ذلك المسجلين ذوي الإعاقة. يتم تقديم جميع مقدمي الخدمات، كما يجب عليهم إكمال تدريب الكفاءة الثقافية.

خدمات الترجمة الفورية

لتسهيل الأمر عليك قامت Blue Shield Promise بتوفير:

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

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

blue california
Promise Health Plan

إشعار عدم التمييز

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

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

- مساعدات وخدمات مجانية للأشخاص ذوي الإعاقات لمساعدتهم في التواصل بشكل أفضل، مثل:
  - ✓ مترجمو لغة إشارة أكفاء
  - ✓ معلومات مكتوبة بتنسيقات مختلفة (كأن تكون مطبوعة بأحرف كبيرة، أو مسجلة صوتيًا، أو تنسيقات إلكترونية يسهل الوصول إليها أو تنسيقات أخرى)
- خدمات لغوية مجانية للأشخاص الذين لا يتحدثون الإنجليزية كلغة أساسية، مثل:
  - ✓ مترجمون فوريون أكفاء
  - ✓ معلومات مكتوبة بلغات مختلفة

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

(Los Angeles) (800) 605-2556

(San Diego) (855) 699-5557

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

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

<u>كيفية تقديم تظلم</u>

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

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

- كتابيًا: املأ نموذج شكوى أو اكتب خطابًا وأرسله إلى:

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

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

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

يمكنك أيضًا تقديم شكوى حقوق مدنية لدى مكتب الحقوق المدنية بإدارة خدمات الرعاية الصحية بولاية كاليفورنيا، عبر الهاتف أو كتابيًا أو إلكترونيًا:

- عن طريق الهاتف: اتصل على الرقم **916-440-7370**. إذا لم يكن بمقدورك التحدث أو السماع جيدًا، يُرجى الاتصال على **711 (خدمة ترحيل الاتصالات)**.
- كتابيًا: املأ نموذج الشكاوى أو أرسل خطابًا إلى:

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

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

- إلكترونيًا: يمكنك إرسال بريدًا إلكترونيًا إلى **CivilRights@dhcs.ca.gov**.

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

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

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

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

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

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

شبكة مقدِّمي خدمات Blue Shield Promise

مفتاح دليل مقدِّم الخدمة

- عنوان مقدِّم الخدمة
- رقم هاتف مقدِّم الخدمة
- رقم هاتف مقدِّم الخدمة بعد ساعات العمل
- اللغة المستخدمة في مكتب مقدِّم الخدمة هذا
- ساعات عمل مقدِّم الخدمة
- معلومات إمكانية الوصول
- الموقع الإلكتروني الخاص بمقدِّم الخدمة

تعريفات ومعلومات عامة

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

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

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

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

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

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

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

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

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

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

- الطبيب العام وطبيب الأسرة
- الطب الباطني
- طب التوليد وطب النساء
- طبيب أطفال

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني **blueshieldca.com/promise/medi-cal**. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

مؤشر إمكانية الوصول المادي لدليل Promise

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

E = غرفة الفحص

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

EB = المبنى الخارجي

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

IB = المبنى الداخلي

الأبواب مفتوحة على اتساعها بما يكفي لدخول مستخدمي الكرسي المتحرك أو دراجة الصغيرة، فضلاً عن أنها مقدمة بمقابض سهلة الاستخدام. المنحدرات الداخلية واسعة بشكل كافٍ ولها درابزين. في حال وجود سلالم فهي ستكون مجهزة بدرابزين.

في حال وجود مصعد، سيكون استخدامه متاحًا للعموم/ المرضى في جميع الأوقات التي يكون فيها المبنى مفتوحًا. المصعد مجهز بأصوات واضحة وأزرار بريل للمكفوفين موجودة في متناول اليد. يحتوي المصعد على مساحة كافية لمستخدمي الكرسي المتحرك أو مستخدمي الدراجة الصغيرة. يمكن استخدام رافعة المنصة دون الحاجة إلى مساعدة، في حال وجودها.

P = موقف السيارات

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

R = المرحاض

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

T = كرسي الفحص/الميزان

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

توضيح رمز إمكانية الوصول

الرمز	الشرح
P	موقف السيارات
EB	المبنى الخارجي
IB	المبنى الداخلي
W	الكرسي المتحرك
R	المرحاض
E	غرفة الفحص
T	كرسي الفحص/الميزان

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني **blueshieldca.com/promise/medi-cal**. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

كيفية قراءة قوائم مقدِّم الخدمة

من شأن المعلومات التالية أن تقوم بمساعدتك على اختيار مقدم الرعاية الأولية المسؤول عنك.

1. التخصص الطبي لمقدِّم الخدمة
2. اسم مقدِّم الخدمة، نوع الرخصة
3. رقم البطاقة التعريفية لمقدِّم الخدمة
4. جنس مقدِّم الخدمة
5. رقم الرخصة الخاصة بمقدِّم الخدمة
6. رقم NPI لمقدم الخدمة
7. اللغات التي يتم التحدث بها
8. تدريب الكفاءة الثقافية
9. الانتساب إلى المستشفى
10. التخصص المعتمد:
11. FQHC/اسم المجموعة الطبية
12. عنوان مقدِّم الخدمة
13. رقم هاتف مقدِّم الخدمة
14. رقم فاكس مقدِّم الخدمة
15. الموقع الإلكتروني الخاص بمقدِّم الخدمة
16. عنوان البريد الإلكتروني لمقدِّم الخدمة
17. إمكانية التعاقد الفرعي مع مقدمي خدمات Medi-Cal:
18. حد السن الأدنى والأقصى:
19. إمكانية الوصول للأشخاص ذوي الإعاقة
20. ساعات عمل مقدِّم الخدمة
21. قبول المرضى الجدد

مثال:

1. طبيب أطفال
2. Doe, Jane, MD
3. الرقم التعريفي لمقدِّم الخدمة: 1003903704
4. أنثى
5. رقم الرخصة 00A123456
6. NPI: 0123456789
7. الإنجليزية، الإسبانية، الفيتنامية، الفارسية
8. نعم
9. Good Samaritan Hospital
10. نعم
11. Northeast County Community Clinic
12. 3840 Kilroy Airport Way
    Long Beach, CA 90806
13. (855) 699-5557
14. (855) 699-5557
15. www.northeastclinic.com
16. doctordoe@gmail.com
17. نعم/لا 18.
18. 0-18
19. محدود. P، EB، IB، E
20. الاثنين إلى الجمعة من الساعة 8 صباحًا حتى الساعة 5 مساءً
21. نعم

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني **blueshieldca.com/promise/medi-cal**. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

الوصول إلى معايير الرعاية في الوقت المناسب

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

سمات الأداء

اطلع على معلومات تفصيلية حول الجودة للمستشفيات من هذه المؤسسات المعترف بها.

Cal Hospital Compare[1]
تفضل بزيارة هذا الموقع الإلكتروني المجاني سهل الاستخدام للاطلاع على تقييمات المرضى.
CalHospitalCompare.org

Leapfrog[2]
Leapfrog هي مجموعة رقابية غير هادفة للربح تجمع المعلومات عن الجودة ورضا المرضى والمأمونية فيما يخص مقدمي الرعاية الصحية. **LeapfrogGroup.org**

Blue Distinction[3]
يعرض هذا البرنامج، من Blue Cross Blue Shield Association، مقدمي الخدمات والأطباء ذوي الجودة الأعلى.

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني **blueshieldca.com/promise/medi-cal**. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

® Blue Distinction Centers for Bariatric Surgery (مراكز Blue Distinction لجراحات علاج البدانة ®)
Blueshieldca.com/bariatric

® Blue Distinction Centers for Cardiac Care (مراكز Blue Distinction للرعاية القلبية ®)
Blueshieldca.com/cardiac

® Blue Distinction Centers for Cellular Immunotherapy (مراكز Blue Distinction لعلاجات المناعة الخلوية ®)
Blueshieldca.com/immuno

® Blue Distinction Centers for Fertility Care (مراكز Blue Distinction لرعاية الخصوبة ®)
Blueshieldca.com/fertilitycare

® Blue Distinction Centers for Knee and Hip Replacement (مراكز Blue Distinction لجراحة استبدال مفصل الركبة والورك ®) **Blueshieldca.com/replacement**

® Blue Distinction Centers for Maternity Care (مراكز Blue Distinction لرعاية الأمومة ®)
Blueshieldca.com/maternitycare

® Blue Distinction Centers for Substance Use Treatment & Recovery (مراكز Blue Distinction لعلاج إدمان المخدرات والتعافي منه ®) **Blueshieldca.com/recovery**

® Blue Distinction Centers for Spine Surgery (مراكز Blue Distinction لجراحات العمود الفقري ®)
Blueshieldca.com/spine

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني **blueshieldca.com/promise/medi-cal**. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Certified Nurse Practitioner
GILBERT, TARI
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: NP10378
NPI#: 1811248347
4168 FRONT ST FL 3
San Diego, CA 92103
(858) 657-8000

Dermatology
ORTIZ, ARISA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A101163
NPI#: 1659556165
8899 UNIVERSITY CENTER LN STE 350
San Diego, CA 92122
(858) 657-8322

Endocrinology Metabolism Diabetes
MCCOWEN, KAREN
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: C127993
NPI#: 1972541274
4910 DIRECTORS PL
San Diego, CA 92121
(858) 249-5400

Endocrinology Metabolism Diabetes
MCCOWEN, KAREN
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: C127993
NPI#: 1972541274
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

Endocrinology Metabolism Diabetes
MCCOWEN, KAREN
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: C127993
NPI#: 1972541274
9350 CAMPUS POINT DR
La Jolla, CA 92037
(858) 657-1636

Endocrinology Metabolism Diabetes Internal Medicine
MIMOTO, MIZUHO
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A156492
NPI#: 1497019178
4168 FRONT ST
San Diego, CA 92103
(858) 657-1636

Family Practice
Celebi, Julie
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A128154
NPI#: 1194080911
330 LEWIS ST
San Diego, CA 92103
(800) 926-8273

Family Practice
FRASER, KEVIN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A191678
NPI#: 1528684131
6655 ALVARADO RD
San Diego, CA 92120
(800) 926-8273

Infectious Disease
Blumenthal, Jill
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A117338
NPI#: 1336308378
4168 FRONT ST FL 3
San Diego, CA 92103
(619) 543-3995

Infectious Disease
Blumenthal, Jill
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A117338
NPI#: 1336308378
4168 FRONT ST
San Diego, CA 92103
(619) 543-6146

Infectious Disease
WAGNER, GABRIEL
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A108967
NPI#: 1992962245
4168 FRONT ST
San Diego, CA 92103
(619) 543-3995

Infectious Disease Internal Medicine
SITAPATI, AMY
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A70282
NPI#: 1730261975
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

Infectious Disease Internal Medicine
SITAPATI, AMY
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A70282
NPI#: 1730261975
8899 UNIVERSITY CENTER LN STE 400
San Diego, CA 92122
(800) 926-8273

Internal Medicine
MENDEZ, ERIC
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A159874
NPI#: 1528599230
330 LEWIS ST
San Diego, CA 92103
(800) 926-8283

Internal Medicine
MILLEN, MARLENE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A82559
NPI#: 1225101355
8899 UNIVERSITY CENTER LN STE 400
San Diego, CA 92122
(800) 926-8273

Internal Medicine
MILLEN, MARLENE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A82559
NPI#: 1225101355
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

Licensed Clinical Social Worker
GALLEGOS, GUADALUPE
A Place of Growth
Licensed Clinical Social Worker
Female
License #: LCS116339
NPI#: 1073892956
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
CORTES, YESENIA
A Place of Growth
Marriage Family Therapist
Female
License #: MFC106084
NPI#: 1821355280
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
QUINTERO, GABRIELA
A Place of Growth
Marriage Family Therapist
Female
License #: MFC124310
NPI#: 1699159764
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
ROSAS, JESSICA
A Place of Growth
Marriage Family Therapist
Female
License #: MFC126541
NPI#: 1124533427
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
BELTRAN, RITA
A Place of Growth
Marriage Family Therapist
Female
License #: MFC141565
NPI#: 1033758909
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
LOPEZ, CARMINA
A Place of Growth
Marriage Family Therapist
Female
License #: MFC115636
NPI#: 1639564396
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
RAHLFS, KATELYN
A Place of Growth
Marriage Family Therapist
Female
License #: MFC121283
NPI#: 1578926192
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Marriage Family Therapist
Villasenor, Vanessa
A Place of Growth
Marriage Family Therapist
Female
License #: MFC85865
NPI#: 1699020644
591 CAMINO DE LA REINA STE 802
San Diego, CA 92108
(858) 519-8002

Obstetrics / Gynecology
ALVARADO, JORGE
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A139473
NPI#: 1538588561
4168 FRONT ST
San Diego, CA 92103
(619) 543-7878

Obstetrics / Gynecology
ALVARADO, JORGE
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A139473
NPI#: 1538588561
8910 VILLA LA JOLLA DR STE 200
La Jolla, CA 92037
(858) 657-8745

Obstetrics / Gynecology
ALVARADO, JORGE
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A139473
NPI#: 1538588561
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

Obstetrics / Gynecology
FRUGONI, GINA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A99646
NPI#: 1578729315
4168 FRONT ST
San Diego, CA 92103
(619) 543-7878

Obstetrics / Gynecology
FRUGONI, GINA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A99646
NPI#: 1578729315
9350 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

Obstetrics / Gynecology
FRUGONI, GINA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A99646
NPI#: 1578729315
9350 CAMPUS POINT DR STE LLC
La Jolla, CA 92037
(858) 657-8745

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
3855 HEALTH SCIENCES DR
La Jolla, CA 92093
(800) 926-8273

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
9400 CAMPUS POINT DR
La Jolla, CA 92093
(858) 657-8200

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
9350 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
9300 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

Otolaryngology
Vahabzadeh-Hagh, Andrew
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A128938
NPI#: 1346506920
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
9400 CAMPUS POINT DR
La Jolla, CA 92093
(858) 657-8200

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
9300 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
9350 CAMPUS POINT DR
La Jolla, CA 92037
(800) 926-8273

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

Otolaryngology
WEISSBROD, PHILIP
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A118221
NPI#: 1366590853
3855 HEALTH SCIENCES DR
La Jolla, CA 92093
(800) 926-8273

Pediatric Emergency Medicine Surgery Plastic
KANACK, MELISSA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A144388
NPI#: 1710373485
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

Physicians Assistant
Nguyen, Khanh
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: PA22239
NPI#: 1427312644
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

Psychiatry
Grelotti, David
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A133738
NPI#: 1619003035
200 W ARBOR DR
San Diego, CA 92103
(619) 543-6222

Psychiatry Psychiatry Child
Grelotti, David
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A133738
NPI#: 1619003035
4168 FRONT ST FL 3
San Diego, CA 92103
(619) 543-3995

Psychiatry Psychiatry Child
Grelotti, David
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A133738
NPI#: 1619003035
200 W ARBOR DR
San Diego, CA 92103
(619) 543-3995

Psychiatry Psychiatry Child
Grelotti, David
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A133738
NPI#: 1619003035
4168 FRONT ST
San Diego, CA 92103
(619) 543-3995

Speech Pathologist
Dockter, Andi
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: SP26061
NPI#: 1073150801
8899 UNIVERSITY CENTER LN
San Diego, CA 92122
(800) 926-8273

Surgery General
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
200 W ARBOR DR
San Diego, CA 92103
(619) 543-6222

Surgery General Surgery General Surgery Plastic Surgery Plastic
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
9300 CAMPUS POINT DR
La Jolla, CA 92037
(619) 294-3746

Surgery General Surgery Plastic
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
4510 EXECUTIVE DR
San Diego, CA 92121
(619) 294-3746

Surgery General Surgery Plastic
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
200 W ARBOR DR
San Diego, CA 92103
(858) 657-7105

Surgery General Surgery Plastic
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
4520 EXECUTIVE DR
San Diego, CA 92121
(800) 926-8273

Surgery General Surgery Plastic
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
1200 GARDEN VIEW RD STE 200
Encinitas, CA 92024
(760) 944-0223

Surgery General Surgery Plastic
WALLACE, ANNE
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: G73000
NPI#: 1699732941
9350 CAMPUS POINT DR
La Jolla, CA 92037
(619) 543-6886

Surgery Plastic
GOSMAN, AMANDA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A96153
NPI#: 1164436291
1200 GARDEN VIEW RD
Encinitas, CA 92024
(800) 926-8273

Surgery Plastic
GOSMAN, AMANDA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A96153
NPI#: 1164436291
200 W ARBOR DR
San Diego, CA 92103
(858) 657-7105

Surgery Plastic
GOSMAN, AMANDA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A96153
NPI#: 1164436291
4510 EXECUTIVE DR
San Diego, CA 92121
(619) 294-3746

Surgery Plastic
GOSMAN, AMANDA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A96153
NPI#: 1164436291
9300 CAMPUS POINT DR
La Jolla, CA 92037
(858) 657-7000

Surgery Plastic
GOSMAN, AMANDA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A96153
NPI#: 1164436291
4520 EXECUTIVE DR
San Diego, CA 92121
(800) 926-8273

Surgery Plastic
GOSMAN, AMANDA
UCSD MEDICAL GROUP
Physician Group Practice
Female
License #: A96153
NPI#: 1164436291
4520 EXECUTIVE DR STE 1
San Diego, CA 92121
(800) 926-8273

Surgery Plastic
SULIMAN, AHMED
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A88033
NPI#: 1013169085
4520 EXECUTIVE DR
San Diego, CA 92121
(800) 926-8273

Surgery Plastic
SULIMAN, AHMED
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A88033
NPI#: 1013169085
1200 GARDEN VIEW RD
Encinitas, CA 92024
(800) 926-8273

Surgery Plastic
SULIMAN, AHMED
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A88033
NPI#: 1013169085
4510 EXECUTIVE DR
San Diego, CA 92121
(619) 294-3746

Urology
HSIEH, TUNG CHIN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A120604
NPI#: 1073758652
9850 GENESEE AVE STE 800
La Jolla, CA 92037
(800) 926-8273

Urology
HSIEH, TUNG CHIN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A120604
NPI#: 1073758652
9333 GENESEE AVE STE 320
San Diego, CA 92121
(858) 657-7876

Urology
HSIEH, TUNG CHIN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A120604
NPI#: 1073758652
9400 CAMPUS POINT DR
La Jolla, CA 92093
(858) 657-8200

Urology
HSIEH, TUNG CHIN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A120604
NPI#: 1073758652
11515 EL CAMINO REAL STE 110
San Diego, CA 92130
(800) 926-8273

Urology
HSIEH, TUNG CHIN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A120604
NPI#: 1073758652
200 W ARBOR DR
San Diego, CA 92103
(800) 926-8273

Urology
PATEL, DARSHAN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A171285
NPI#: 1417342924
16950 VIA TAZON
San Diego, CA 92127
(800) 926-8273

Urology
PATEL, DARSHAN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A171285
NPI#: 1417342924
9333 GENESEE AVE
San Diego, CA 92121
(800) 926-8273

Urology
PATEL, DARSHAN
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A171285
NPI#: 1417342924
9333 GENESEE AVE STE 320
San Diego, CA 92121
(800) 926-8273

Urology
WOO, JASON
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A114634
NPI#: 1437380086
200 W ARBOR DR
San Diego, CA 92103
(619) 543-3572

Urology
WOO, JASON
UCSD MEDICAL GROUP
Physician Group Practice
Male
License #: A114634
NPI#: 1437380086
1671 W MAIN ST STE B
El Centro, CA 92243
(855) 543-0555

B. عيادات الصحة المؤهلة فيدراليًا

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 320-3347

After Hours Phone: (619) 662-4100

License Number: 090000681

NPI: 1770124315

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

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

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.mtnhealth.org

BORREGO SPRINGS

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR

Provider ID: 703466

4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760) 767-5051

License Number: 080000651

NPI: 1306464326

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: DAP HEALTH INC

Website: N/A

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR

Provider ID: 703466

4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760) 767-5051

License Number: 080000651

NPI: 1306464326

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: DAP HEALTH INC

Website: N/A

CAMPO

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 478-9164

After Hours Phone: (619) 662-4100

License Number: 090000660

NPI: 1174164719

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CARLSBAD

TRUECARE
Provider ID: 480120
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000240
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
SA 8AM-2PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

TRUECARE
Provider ID: 480120
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000630
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
SA 8AM-2PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

TRUECARE
Provider ID: 480120
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 550003541
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
SA 8AM-2PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

CHULA VISTA

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS
Provider ID: 664445
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 426-2170
After Hours Phone: (619) 662-4100
License Number: 550002394
NPI: 1184135873
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619) 515-2500

License Number: 550002061

NPI: 1346480837

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619) 662-4100

License Number: 550002394

NPI: 1326486861

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.syhealth.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619) 515-2325

License Number: 550002305

NPI: 1083959464

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

EL CAJON

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

Fax: (619) 795-5992

After Hours Phone: (619) 795-5991

License Number: 550003567

NPI: 1134590086

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

B. عيادات الصحة المؤهلة فيدراليًا

LA MAESTRA CHC-REA AVE
Provider ID: 664824
181 REA AVE
EL CAJON, CA 92020
Phone: (619) 312-0347
Fax: (619) 510-4649
After Hours Phone: (619) 312-0347
License Number: 090000378
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

SAN YSIDRO HEALTH EL CAJON
Provider ID: 569910
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
License Number: 550002514
NPI: 1568845741
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Arabic, Farsi, Russian, Latin
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

DAP HEALTH-CENTRO MEDICO EL CAJON
Provider ID: 703462
133 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 873-8940
Fax: (619) 401-0522
After Hours Phone: (619) 873-8940
License Number: 550000430
NPI: 1154480069
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DAP HEALTH INC
Website: N/A

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
Fax: (619) 269-0191
After Hours Phone: (619) 515-2498
License Number: 550003553
NPI: 1932561198
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
NPI: 1336353721
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

CHASE AVENUE FAMILY HEALTH CTRS INC
Provider ID: 206354
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
Fax: (619) 593-7164
After Hours Phone: (619) 515-2499
License Number: 090000631
NPI: 1104861681
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

ESCONDIDO

NEIGHBORHOOD HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745
After Hours Phone: (760) 520-8100
License Number: 080000397
NPI: 1598703647
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
Provider ID: 424775
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
License Number: 550000511
NPI: 1437335353
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL
Provider ID: 206266
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760)

520-8340
License Number: 080000657
NPI: 1265618185
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
License Number: 080000158
NPI: 1720264641
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

DAP HEALTH-CENTRO MEDICO ESCONDIDO
Provider ID: 703482
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
License Number: 550001260
NPI: 1023349883
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DAP HEALTH INC
Website: N/A

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

ESCONDIDO FAMILY HEALTH CENTER
Provider ID: 652372
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (619) 515-2474
After Hours Phone: (619) 515-2474
License Number: 550002865
NPI: 1417640491
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: N/A

FALLBROOK

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 080000002
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

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

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550003781
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550004110
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

License Number: 080000002

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

License Number: 080000745

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

License Number: 550003781

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

License Number: 550004110

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

321 E ALVARADO ST

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

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 080000745
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550003781
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550004110
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR
Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 451-4700
After Hours Phone: (760) 451-4720
License Number: 080000150
NPI: 1982756086

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish*

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

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

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

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER
Provider ID: 179678
- 949 PALM AVE IMPERIAL BEACH, CA 91932
- *Phone: (619) 429-3733*

Fax: (619) 628-5550
- *After Hours Phone: (619) 429-3733*

License Number: 090000119
NPI: 1790718351
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Tagalog*

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

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

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

JULIAN

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE
Provider ID: 664467
- 2721 WASHINGTON ST JULIAN, CA 92036
- *Phone: (619) 662-4100*

Fax: (760) 765-1278
- *After Hours Phone: (619) 662-4100*

License Number: 550002514
NPI: 1235804139
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Japanese*

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

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

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

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE
Provider ID: 664467
- 2721 WASHINGTON ST JULIAN, CA 92036
- *Phone: (619) 662-4100*

Fax: (760) 765-1278
- *After Hours Phone: (619) 662-4100*

License Number: 550002514
NPI: 1235804139
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Japanese*

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

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

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

LAKESIDE

NEIGHBORHOOD HEALTHCARE LAKESIDE
Provider ID: 353843
- 10039 VINE ST LAKESIDE, CA 92040
- *Phone: (858) 218-3000*

Fax: (360) 462-2744

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (858) 218-3000
License Number: 080000483
NPI: 1932384120
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
Fax: (619) 825-9577
After Hours Phone: (619) 515-2550
License Number: 550001268
NPI: 1427282466
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 9AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: N/A

NATIONAL CITY

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619) 515-2399
License Number: 550000465
NPI: 1417409228
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2811
After Hours Phone: (619) 662-4100
License Number: 550001126
NPI: 1598907487
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 434-3514

After Hours Phone: (619) 662-4100
License Number: 550003806
NPI: 1851757215
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
NPI: 1336353721
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC
Website: www.lamaestra.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 434-8999
After Hours Phone: (844) 200-2426
License Number: 550002622
NPI: 1205134517
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
License Number: 090000136
NPI: 1003869363
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
License Number: 090000183
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Lao, Spanish
Cultural Competency: N
Hours: M-TH 8AM-6PM F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OCEANSIDE

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000002
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM TH 8AM-12PM F 8AM-5PM SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM TH 8AM-12PM F 8AM-5PM SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 550003781
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM TH 8AM-12PM F 8AM-5PM SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 550004110
NPI: 1649662719
Accepting New Patients: Yes

Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000002
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 550003781
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 550004110
NPI: 1851300123
Accepting New Patients: Yes

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000002
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 550003781
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 550004110
NPI: 1316501562
Accepting New Patients: Yes

Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.vistacommunityclinic.org

TRUECARE
Provider ID: 480247
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000531
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
SA 8AM-4:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

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

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

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

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

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

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

VISTA COMMUNITY CLINIC HORNE STREET
Provider ID: 402436
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1609094036
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

POWAY

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858) 218-3000

License Number: 550004321

NPI: 1023518768

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: N/A

RAMONA

TRUECARE

Provider ID: 449438

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

License Number: 080000149

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

SA 8AM-12PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ihpsocal.org

SAN DIEGO

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
License Number: 550002478
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
License Number: 550003857
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
License Number: 550003857
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

NESTOR COMMUNITY HEALTH CENTER
Provider ID: 214492
1016 OUTER RD

SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
License Number: 550001474
NPI: 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: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.ibclinic.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
License Number: 550000465
NPI: 1982747671
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
Fax: (619) 269-0053
After Hours Phone: (619) 515-2422
License Number: 550003113
NPI: 1235521782
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
Fax: (619) 515-2435
After Hours Phone: (619) 515-2435
License Number: 090000565
NPI: 1174549232
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067

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

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
License Number: 090000660
NPI: 1538262092
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hours: M-F 8AM-5PM SA 8AM-12PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 232-5922
After Hours Phone: (619) 662-4100
License Number: 090000143
NPI: 1326225632
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: , Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 624977
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 664747
2114 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2406
After Hours Phone: (619) 515-2406
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\None

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

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5:30PM SA 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH PRECISION PARK

Provider ID: 631494
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619) 662-4100
License Number: 550007737
NPI: 1124782685
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
License Number: 550002478
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426
License Number: 080000146
NPI: 1861933897
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
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: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
Website: www.operationsamahan.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
License Number: 080000069
NPI: 1609905215
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
License Number: 080000069
NPI: 1780665877
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
License Number: 550003427
NPI: 1457724858
Accepting New Patients: Yes

Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: N
Hours: M 8:30AM-5:30PM TU 8:30AM-8:30PM W-F 8:30AM-5:30PM SA 9AM-4PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.sdfamilycare.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
License Number: 090000469
NPI: 1184169963
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586
After Hours Phone: (619) 515-2424
License Number: 090000469
NPI: 1700821303
Accepting New Patients: Yes
Min/Max Age: 0\18
Site English Spoken: Y
Cultural Competency: N
Hours: M-TH 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
License Number: 090000469
NPI: 1700821303
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER
Provider ID: 207382
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
License Number: 090000168
NPI: 1003902917
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y

Site Languages(s) Spoken: Korean, Spanish, Hindi
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: WWW.SDAIHC.ORG
Indian Health Services: Indian Health Services: Y

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: 418142
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
Fax: (619) 794-2696
After Hours Phone: (619) 515-2454
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
Provider ID: 417429
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
Fax: (619) 501-5814
After Hours Phone: (619) 515-2525
License Number: 550002865
NPI: 1356750376
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
Fax: (619) 578-2410
After Hours Phone: (619) 515-2430
License Number: 550002251
NPI: 1588901045
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HEALTH CTR OF SD-ELM ST
Provider ID: 419167
140 ELM ST
SAN DIEGO, CA 92101
Phone: (619) 515-2520
Fax: (619) 231-0431
After Hours Phone: (619) 515-2520
License Number: 550002061
NPI: 1316419070
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y

Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
Fax: (858) 488-1394
After Hours Phone: (619) 515-2444
License Number: 080000115
NPI: 1386689701
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619) 662-4100
License Number: 550003882
NPI: 1205477841
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

FAMILY HEALTH CTR IBARRA
Provider ID: 417987
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
Fax: (619) 255-8002
After Hours Phone: (619) 515-2426
License Number: 550003108
NPI: 1477953933
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233597
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
NPI: 1962483040
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM SA 8AM-2PM
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619) 280-2058

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\22

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.sdfamilycare.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 795-9849

After Hours Phone: (619) 255-9155

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT

Provider ID: 708497

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 312-0347

Fax: (619) 510-4649

After Hours Phone: (619) 312-0347

License Number: 090000378

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

Website: N/A

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

License Number: 550003099

NPI: 1629456900

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

SAN MARCOS

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1598484255

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1811617939

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hours: M-F 8AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

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

Site Languages(s) Spoken: Spanish

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

License Number: 080000167

NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish*

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

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

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

TRUECARE
Provider ID: 206426
150 VALPREDA RD
SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*

Fax: (760) 736-6744
- *After Hours Phone: (760) 736-6767*

License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish*

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

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

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

SAN YSIDRO

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

Fax: (619) 600-4870
- *After Hours Phone: (619) 662-4100*

License Number: 550002823
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: , Spanish*

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

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

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

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

Fax: (619) 205-6341
- *After Hours Phone: (619) 662-4100*

NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: 0\None
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: N
- *Hours: M-F 8AM-8PM SA 8AM-2PM*

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

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

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

Fax: (619) 205-1967
- *After Hours Phone: (619)*

662-4100
License Number: 550004555
NPI: 1558852947
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: www.syhealth.org

SANTEE

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

SPRING VALLEY

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

VALLEY CENTER

NEIGHBORHOOD HEALTHCARE
Provider ID: 519918
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
License Number: 080000483
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

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

742-9919
License Number: 080000397
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

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

NEIGHBORHOOD HEALTHCARE
Provider ID: 519918
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
License Number: 080000483
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8AM-5PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CAL-PHP
Website: N/A

VISTA

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

VCC DURIAN
Provider ID: 411518
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844) 308-5003
License Number: 1851300123
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hours: M-TU 8:30AM-5PM TH-F 8:30AM-5PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

License Number: 080000328

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CAL-PHP

Website: www.vistacommunityclinic.org

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

License Type: NP
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

License Type: NP
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

License Type: NP
Provider Gender: Female
License Number: NP23004
NPI: 1760765333
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

License Type: NP
Provider Gender: Female
License Number: NP23004
NPI: 1760765333
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
License Type: NP
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
License Type: NP
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED
License Type: DC
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
Provider English Spoken: Y
Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED
License Type: DC
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
Provider English Spoken: Y
Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
Fax: (619) 205-6305

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW
License Type: DC
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

KELCHNER, MATTHEW
License Type: DC
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

BAUTISTA, LUIS
License Type: MD
Provider Gender: Male
License Number: A97270
NPI: 1295712206
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS
License Type: MD
Provider Gender: Male
License Number: A97270
NPI: 1295712206
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER

Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA
License Type: MD
Provider Gender: Female
License Number: C172036
NPI: 1740535152
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA
License Type: MD
Provider Gender: Female
License Number: C172036
NPI: 1740535152
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider Gender: Female
License Number: A88893
NPI: 1164508073

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL
License Type: MD
Provider Gender: Female
License Number: A177337
NPI: 1497217756
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL
License Type: MD
Provider Gender: Female
License Number: A177337
NPI: 1497217756
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider Gender: Male
License Number: 20A11088
NPI: 1922314145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER

FAMILY PRACTICE

WYLIE, BLAKE

License Type: DO

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

NPI: 1770124315

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 320-3347

After Hours Phone: (619) 662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

NPI: 1770124315

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 320-3347

After Hours Phone: (619) 662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

STENSMAN, LARS

License Type: MD

Provider Gender: Male

License Number: A158569

NPI: 1659638062

Provider English Spoken: Y

Provider Language(s) Spoken: Danish, French, Norwegian, Swedish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

STENSMAN, LARS

License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
License Type: PA
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
License Type: PA
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IHP OF SOUTHERN CAL-PHP
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BORREGO SPRINGS

FQHC

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,
Provider ID: 313070
NPI: 1306464326
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,
Provider ID: 317368
NPI: 1306464326
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,
Provider ID: 313070
NPI: 1306464326
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR,
Provider ID: 317368
NPI: 1306464326
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
Website: N/A
Medi-Cal Open Panel: Yes

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

CAMPO

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL
License Type: NP
Provider ID: 275112
Provider Gender: Female
License Number: NP20849
NPI: 1487889846
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAUM, PETER
License Type: DO
Provider ID: 302751
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
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL
License Type: NP
Provider ID: 275112
Provider Gender: Female
License Number: NP20849
NPI: 1487889846
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAUM, PETER
License Type: DO
Provider ID: 275112
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

BAUM, PETER

License Type: DO

Provider ID: 275112

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: CONTACT PROVIDER

FAMILY PRACTICE

CAMPOS, PRISCILLA

License Type: MD

Provider ID: 275112

Provider Gender: Female

License Number: A152651

NPI: 1508217399

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

CAMPOS, PRISCILLA

License Type: MD

Provider ID: 275112

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORONADO, MYRNA

License Type: MD

Provider ID: 275112

Provider Gender: Female

License Number: A112627

NPI: 1710147566

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 275112
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 275112
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 445-6200
After Hours Phone: (619) 445-6200
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 275112
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 445-6200
After Hours Phone: (619) 445-6200
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

MCINTYRE, RYAN

License Type: MD

Provider ID: 275112

Provider Gender: Male

License Number: A133029

NPI: 1164776555

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

MCINTYRE, RYAN

License Type: MD

Provider ID: 275112

Provider Gender: Male

License Number: A133029

NPI: 1164776555

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ORTIZ, KENNETH

License Type: MD

Provider ID: 275112

Provider Gender: Male

License Number: A156607

NPI: 1356761571

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ORTIZ, KENNETH

License Type: MD

Provider ID: 275112

Provider Gender: Male

License Number: A156607

NPI: 1356761571

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROGERS, MATTHEW
License Type: DO
Provider ID: 275112
Provider Gender: Male
License Number: 20A18400
NPI: 1639606130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROGERS, MATTHEW
License Type: DO
Provider ID: 302754
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ROGERS, MATTHEW
License Type: DO
Provider ID: 275112
Provider Gender: Male
License Number: 20A18400
NPI: 1639606130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SAIDRO, LUZVIMINDA
License Type: MD
Provider ID: 275112
Provider Gender: Female
License Number: A93746
NPI: 1750364386

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

SAIDRO, LUZVIMINDA
License Type: MD
Provider ID: 275112
Provider Gender: Female
License Number: A93746
NPI: 1750364386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,
Provider ID: 275112
NPI: 1174164719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 478-9164
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,
Provider ID: 275112
NPI: 1174164719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 478-9164
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC
License Type: MD

Provider ID: 275112
Provider Gender: Male
License Number: A112484
NPI: 1841496452
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: NATIVIDAD MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC
License Type: MD
Provider ID: 275112
Provider Gender: Male
License Number: A112484
NPI: 1841496452
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: NATIVIDAD MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider ID: 275112
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider ID: 275112
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider ID: 275112
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CARLSBAD

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF
Provider ID: 289874
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF
Provider ID: 305300
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF
Provider ID: 289874
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

License Type: NPF
Provider ID: 305300
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

TRUECARE,
Provider ID: 289874
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

TRUECARE,
Provider ID: 289874
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

PEDIATRICS

BURGAMY, ELIZABETH
License Type: MD
Provider ID: 204602
Provider Gender: Female
NPI: 1164609558
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760) 633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

IYENGAR, RADHA
License Type: MD
Provider ID: 289874
Provider Gender: Female
License Number: A49273
NPI: 1265448112
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

PEDIATRICS

IYENGAR, RADHA
License Type: MD
Provider ID: 305300
Provider Gender: Female
License Number: A49273
NPI: 1265448112
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

PEDIATRICS

IYENGAR, RADHA
License Type: MD
Provider ID: 289874
Provider Gender: Female
License Number: A49273
NPI: 1265448112
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

PEDIATRICS

IYENGAR, RADHA
License Type: MD
Provider ID: 305300
Provider Gender: Female
License Number: A49273
NPI: 1265448112
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

PEDIATRICS

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

MUTH, NATALIE
License Type: MD
Provider ID: 204731
Provider Gender: Female
NPI: 1497982888
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760) 633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

OCONNOR, ERICA
License Type: MD
Provider ID: 302621
Provider Gender: Female
NPI: 1134782725
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760) 633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

TANAKA, MARY
License Type: MD
Provider ID: 241393
Provider Gender: Female
NPI: 1295962686
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760) 633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHULA VISTA

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN CARLOS
License Type: NP
Provider ID: 39174
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN CARLOS
License Type: NP
Provider ID: 39174
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
License Type: NP
Provider ID: 217488
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
License Type: NP
Provider ID: 217488
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP

Provider ID: 39174

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP

Provider ID: 39174

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

License Type: NP

Provider ID: 39174

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

License Type: NP

Provider ID: 39174

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
License Type: RN
Provider ID: 217488
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
License Type: RN
Provider ID: 217488
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
License Type: RN
Provider ID: 217488
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN
License Type: RN
Provider ID: 217488
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
License Type: NP
Provider ID: 217488
Provider Gender: Female
License Number: NP95015413
NPI: 1548683378
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
License Type: NP
Provider ID: 217488
Provider Gender: Female
License Number: NP95015413
NPI: 1548683378
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SAUNDERS, DENISE
License Type: NP
Provider ID: 39174
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SAUNDERS, DENISE
License Type: NP
Provider ID: 39174
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

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

CERTIFIED NURSE PRACTITIONER

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 39174
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 39174
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
- *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: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
License Type: CRNM
Provider ID: 39174
Provider Gender: Female
License Number: NM792
NPI: 1174553259
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
License Type: CRNM
Provider ID: 39174
Provider Gender: Female
License Number: NM792
NPI: 1174553259
- *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: CONTACT PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED
License Type: DC
Provider ID: 39174
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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

CHIROPRACTOR

ABDULRAHIM, AHMED
License Type: DC
Provider ID: 39174
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
Provider English Spoken: Y
Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

HASHEM, SHIVA
License Type: DC
Provider ID: 39174
Provider Gender: Female
License Number: DC26269
NPI: 1952950776
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

HASHEM, SHIVA
License Type: DC
Provider ID: 39174
Provider Gender: Female
License Number: DC26269
NPI: 1952950776
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

KAZEM, HARON
License Type: DC
Provider ID: 217488
Provider Gender: Male
License Number: DC33295
NPI: 1306221262
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CHIROPRACTOR

KAZEM, HARON
License Type: DC
Provider ID: 217488
Provider Gender: Male
License Number: DC33295
NPI: 1306221262
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

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

CHIROPRACTOR

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

CHIROPRACTOR

REYNOSO, ALFONSO
License Type: DC
Provider ID: 217488
Provider Gender: Male
License Number: DC20760
NPI: 1285921627
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

License Type: DC

Provider ID: 217488

Provider Gender: Male

License Number: DC20760

NPI: 1285921627

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CARRILLO, MARITZA

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

CARRILLO, MARITZA

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A124388
NPI: 1700175577
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A124388
NPI: 1700175577
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AMANAT, SOROOSH
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 217488
Provider Gender: Male
License Number: A153022
NPI: 1003279621
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*

FAMILY PRACTICE

AMANAT, SOROOSH
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A153022
NPI: 1003279621
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*

FAMILY PRACTICE

ARCE GOMEZ, LAURA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123604
NPI: 1053532986
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

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

FAMILY PRACTICE

ARCE GOMEZ, LAURA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123604
NPI: 1053532986
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

CAMPOS, MELISSA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A138474
NPI: 1427475318
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A138474
NPI: 1427475318
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A108681
NPI: 1114183688
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 73137
Provider Gender: Female
License Number: A108681
NPI: 1114183688
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 73137
Provider Gender: Female
License Number: A108681
NPI: 1114183688
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CHERY, FARAH
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A108681
NPI: 1114183688
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORNEJO PINA, RAQUEL
License Type: MD
Provider ID: 39174
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

CORNEJO PINA, RAQUEL
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A177698
NPI: 1255893368
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*
- *Website: www.fhcsd.org*

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

FAMILY PRACTICE

DY, DIANE
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A153344
NPI: 1467807560
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*
- *Website: www.fhcsd.org*

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

FAMILY PRACTICE

DY, DIANE
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A153344
NPI: 1467807560
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*
- *Website: www.fhcsd.org*

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

FAMILY PRACTICE

GARCIA, KARLA
License Type: MD
Provider ID: 217488

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

GARCIA, KARLA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A120672
NPI: 1154647410
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

HUBLEY, PAUL
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: A73172
NPI: 1568496974
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HUBLEY, PAUL
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: A73172
NPI: 1568496974
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

JIMENEZ, KRYSTAL
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A159831
NPI: 1922531250
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

JIMENEZ, KRYSTAL
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A159831
NPI: 1922531250
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

JOHNSON, DANIEL
License Type: DO
Provider ID: 217488
Provider Gender: Male
License Number: 20A9393
NPI: 1245311216
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

FAMILY PRACTICE

JOHNSON, DANIEL
License Type: DO
Provider ID: 217488
Provider Gender: Male

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

LARA, LESLEY
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A173435
NPI: 1184112682
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 425-6941*
- *After Hours Phone: (619) 425-6941*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-4PM*

FAMILY PRACTICE

LARA, LESLEY
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A173435
NPI: 1184112682
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 425-6941*
- *After Hours Phone: (619) 425-6941*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-4PM*

FAMILY PRACTICE

MCKENNETT, MARIANNE
License Type: MD
Provider ID: 217488
Provider Gender: Female
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*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

MCKENNETT, MARIANNE
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G57243
NPI: 1376639666
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MENON, POOJA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123263
NPI: 1053600064
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MENON, POOJA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123263
NPI: 1053600064
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MERRILL, SARAH
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123492
NPI: 1225399512
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910

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

FAMILY PRACTICE

MERRILL, SARAH
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A123492
NPI: 1225399512
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A80185
NPI: 1093844417
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

MOYA, MARY
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A80185
NPI: 1093844417
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A106103
NPI: 1174781132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A106103
NPI: 1174781132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH
License Type: MD
Provider ID: 73137
Provider Gender: Female
License Number: A144995
NPI: 1619357993
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH
License Type: MD
Provider ID: 73137
Provider Gender: Female
License Number: A144995
NPI: 1619357993
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PALOMINO, MARY

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

PALOMINO, MARY

License Type: MD

Provider ID: 217488

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

PEDROTTY, JOHN

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEDROTTY, JOHN

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEDROTTY, JOHN

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PIEROS, JANELLE
License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A13225
NPI: 1386935914
Provider English Spoken: Y
Provider Language(s) Spoken: Faroese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

PIEROS, JANELLE
License Type: DO
Provider ID: 217488

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

PISINGER, PATRICIA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A69264
NPI: 1861428302
Provider English Spoken: Y
Provider Language(s) Spoken: Czech
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A69264
NPI: 1861428302
Provider English Spoken: Y
Provider Language(s) Spoken: Czech
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAHMAN, AKBAR
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A110134
NPI: 1720314933
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA 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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAHMAN, AKBAR
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A110134
NPI: 1720314933
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA 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: CONTACT PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE
License Type: DO
Provider ID: 217488
Provider Gender: Male
License Number: 20A9060
NPI: 1427123991
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE
License Type: DO
Provider ID: 217488
Provider Gender: Male
License Number: 20A9060
NPI: 1427123991
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SERPAS, SHAILA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G74728
NPI: 1124039136
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No

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

FAMILY PRACTICE

SERPAS, SHAILA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G74728
NPI: 1124039136
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: G72486
NPI: 1396754131
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: G72486
NPI: 1396754131
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A41486
NPI: 1427126648
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A41486
NPI: 1427126648
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

TREJO, RAUL
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A77936
NPI: 1174534184
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TREJO, RAUL
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A77936
NPI: 1174534184
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A71304
NPI: 1972732584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 217488

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

WEN, AKI
License Type: DO
Provider ID: 217488
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WEN, AKI
License Type: DO
Provider ID: 217488
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WHITLEY, NICHOLAS
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A118250
NPI: 1629394721
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

WHITLEY, NICHOLAS
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A118250
NPI: 1629394721
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A114600
NPI: 1942435144
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A114600
NPI: 1942435144
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

CHULA VISTA FAMILY HLTH CTR,
Provider ID: 39174
NPI: 1346480837
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 39174

NPI: 1346480837

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 73137

NPI: 1083959464

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619) 515-2325

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 73137

NPI: 1083959464

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619) 515-2325

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 217488

NPI: 1326486861

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 217488

NPI: 1326486861
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,
Provider ID: 307636
NPI: 1184135873
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 426-2170
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,
Provider ID: 307636
NPI: 1184135873
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 426-2170
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL DENTISTRY

PHAM, QUYNH
License Type: DDS
Provider ID: 217488
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL DENTISTRY

PHAM, QUYNH
License Type: DDS
Provider ID: 217488
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

GENERAL PRACTICE

SAMI, REMAN
License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

SAMI, REMAN
License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A162816
NPI: 1932558301
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

HEMATOLOGY / ONCOLOGY

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INFECTIOUS DISEASE

POLESKY, ANDREA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G81333
NPI: 1063517365
Provider English Spoken: Y
Provider Language(s) Spoken: Tongan
Cultural Competency: N
Hospital Affiliation: SANTA CLARA VALLEY MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 425-6941
After Hours Phone: (619) 425-6941
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

INFECTIOUS DISEASE

POLESKY, ANDREA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: G81333
NPI: 1063517365
Provider English Spoken: Y
Provider Language(s) Spoken: Tongan
Cultural Competency: N
Hospital Affiliation: SANTA CLARA VALLEY MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 425-6941
After Hours Phone: (619) 425-6941
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

INTERNAL MEDICINE

CHEN, TSUH-YIN
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: C55563
NPI: 1093803520
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

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

INTERNAL MEDICINE

CHEN, TSUH-YIN
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: C55563
NPI: 1093803520
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A56153
NPI: 1518965714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A56153
NPI: 1518965714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A68463

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A68463

NPI: 1376663831
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: A113001

NPI: 1225231582
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: A113001
NPI: 1225231582
- *Provider English Spoken: Y*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL 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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: A108228
NPI: 1629277322
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 39174
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A114893
NPI: 1750559589
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

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

OBSTETRICS / GYNECOLOGY

SHORT, ABIADE
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A114893
NPI: 1750559589
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

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

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 39174
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
- *Phone: (619) 515-2500*
- *After Hours Phone: (619) 515-2500*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 39174
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
License Type: DO
Provider ID: 217488
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 39174
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD

Provider ID: 39174

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

SKAF, AYHAM
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM
License Type: MD
Provider ID: 217488
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ATIENZA, PAMELA
License Type: MD
Provider ID: 202519
Provider Gender: Female
NPI: 1417916107
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
890 EASTLAKE PKWY STE 200
CHULA VISTA, CA 91914
Phone: (619) 656-6817
Fax: (619) 656-6908
After Hours Phone: (619) 506-1218
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND
License Type: MD
Provider ID: 265352
Provider Gender: Male
NPI: 1982662193
Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
890 EASTLAKE PKWY STE 200
CHULA VISTA, CA 91914
Phone: (619) 656-6817
Fax: (619) 656-6908
After Hours Phone: (619) 656-6817
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

BROUDY, ABRAHAM
License Type: MD
Provider ID: 204506
Provider Gender: Male
NPI: 1528039526
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CAPETANAKIS, ELENI
License Type: MD
Provider ID: 204392
Provider Gender: Female
NPI: 1346211554
Provider English Spoken: Y
Provider Language(s) Spoken: Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CORDOBA, MIGUEL
License Type: MD
Provider ID: 204390
Provider Gender: Male
NPI: 1053382176
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

DONG, TAMMY
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A66903
NPI: 1386655413
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

DONG, TAMMY
License Type: MD
Provider ID: 217488
Provider Gender: Female
License Number: A66903
NPI: 1386655413
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

DORINGO, ELAINIE
License Type: MD
Provider ID: 204936
Provider Gender: Female
NPI: 1013005636
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH

NETWORK
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

FLETCHER, EMILY
License Type: MD
Provider ID: 204524
Provider Gender: Female
NPI: 1780935940
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, MERCY HOSPITAL BAKERSFIELD, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

FLORES, ERNEST
License Type: MD
Provider ID: 303789
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

FRESNO, BLANCA
License Type: MD
Provider ID: 204716
Provider Gender: Female
NPI: 1346258787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

GARCIA, RAFAEL
License Type: MD
Provider ID: 204939
Provider Gender: Male
NPI: 1053414086
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
752 MEDICAL CENTER CT STE 210
CHULA VISTA, CA 91911
Phone: (619) 656-0206
Fax: (619) 656-8936
After Hours Phone: (619) 656-0206
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 302740
Provider Gender: Female
NPI: 1508904657
Provider English Spoken: Y
Provider Language(s) Spoken: Faroese, Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN
License Type: MD
Provider ID: 307636
Provider Gender: Female
License Number: C51110
NPI: 1508904657
Provider English Spoken: Y
Provider Language(s) Spoken: Faroese, Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRICS

GHAHREMANI, SIMIN

License Type: MD

Provider ID: 307636

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s) Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

HOLLICK, NATALIE

License Type: DO

Provider ID: 261027

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

ISAIAS, AGNELA

License Type: MD

Provider ID: 307636

Provider Gender: Female

License Number: A82912

NPI: 1790772572

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

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: CONTACT PROVIDER

PEDIATRICS

ISAIAS, AGNELA

License Type: MD

Provider ID: 307636

Provider Gender: Female

License Number: A82912

NPI: 1790772572

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL,

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

JACOBS-KLEISLI, MILAGROS
License Type: DO
Provider ID: 261028
Provider Gender: Female
NPI: 1811221641
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, HUNTINGTON MEMORIAL HOSPITAL, USC Arcadia Hospital
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 307636
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID
License Type: MD
Provider ID: 307636
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

KORSAND, SID

License Type: MD

Provider ID: 302755

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

MCMAHON, SHARON

License Type: DO

Provider ID: 302425

Provider Gender: Female

NPI: 1487279246

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

MISTRY, CHETAN

License Type: MD

Provider ID: 204842

Provider Gender: Male

NPI: 1467505834

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619) 656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, TRUC

License Type: MD

Provider ID: 204837

Provider Gender: Female

NPI: 1881884054

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, WASHINGTON HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

OIRA, VICTORIA
License Type: MD
Provider ID: 205035
Provider Gender: Female
NPI: 1134172448
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
890 EASTLAKE PKWY STE 203
CHULA VISTA, CA 91914
Phone: (619) 656-3020
Fax: (619) 656-3019
After Hours Phone: (619) 370-6661
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM

PEDIATRICS

ROWHANI, NAGHMEH
License Type: MD
Provider ID: 307636
Provider Gender: Female
License Number: A92037
NPI: 1992876759
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

ROWHANI, NAGHMEH
License Type: MD
Provider ID: 307636
Provider Gender: Female
License Number: A92037
NPI: 1992876759
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
Board Certified: 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):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

SALAZAR, JUANITA

License Type: MD

Provider ID: 39174

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SALAZAR, JUANITA

License Type: MD

Provider ID: 39174

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SANTIAGO, ROXANE

License Type: MD

Provider ID: 206254

Provider Gender: Female

NPI: 1033461801

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRICS

SHETH, HASMUKH

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: A45942

NPI: 1396812236

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Gujarati, Hindi, Urdu*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SHETH, HASMUKH

License Type: MD

Provider ID: 217488

Provider Gender: Male

License Number: A45942

NPI: 1396812236

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Gujarati, Hindi, Urdu*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

VALENCIA, MARILES

License Type: MD

Provider ID: 204502

Provider Gender: Female

NPI: 1275541625

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915

Phone: (619) 482-1700

Fax: (619) 475-4578

After Hours Phone: (619) 482-1700

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

YAO, CATHERINE

License Type: MD

Provider ID: 204644

Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

ZARGAR, SHABNAM
License Type: MD
Provider ID: 204417
Provider Gender: Female
NPI: 1417256074
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
License Type: PA
Provider ID: 39174
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
License Type: PA
Provider ID: 73137
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

515-2325
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
License Type: PA
Provider ID: 39174
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA
License Type: PA
Provider ID: 73137
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

INDA, PRISCILLA
License Type: PA
Provider ID: 217488
Provider Gender: Female
License Number: PA54404
NPI: 1679008379
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

INDA, PRISCILLA
License Type: PA
Provider ID: 217488
Provider Gender: Female
License Number: PA54404
NPI: 1679008379
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Language(s) Spoken: Arabic, Russian, 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

MENDEZ, JESUS
License Type: PA
Provider ID: 217488
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MENDEZ, JESUS
License Type: PA
Provider ID: 217488
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH
License Type: PA
Provider ID: 39174
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH
License Type: PA
Provider ID: 39174
Provider Gender: Female
License Number: PA21591
NPI: 1790055010

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REVELES, DIANA
License Type: PA
Provider ID: 73137
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REVELES, DIANA
License Type: PA
Provider ID: 73137
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE
License Type: DPM
Provider ID: 217488
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE

License Type: DPM
Provider ID: 217488
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 39174
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 39174
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO
License Type: PT
Provider ID: 39174
Provider Gender: Male
License Number: PT37189
NPI: 1437445566
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

THERAPIST

AMAYA, RICARDO

License Type: PT

Provider ID: 39174

Provider Gender: Male

License Number: PT37189

NPI: 1437445566

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

AVILES, LEAH

License Type: PT

Provider ID: 39174

Provider Gender: Female

License Number: PT298792

NPI: 1548867419

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

AVILES, LEAH

License Type: PT

Provider ID: 39174

Provider Gender: Female

License Number: PT298792

NPI: 1548867419

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

License Type: PT

Provider ID: 39174

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

License Type: PT
Provider ID: 39174
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

License Type: PT
Provider ID: 39174
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

License Type: PT
Provider ID: 39174
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA

License Type: PT
Provider ID: 39174
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org

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

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA
License Type: PT
Provider ID: 39174
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

EL CAJON

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
License Type: NP
Provider ID: 107522
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
License Type: NP
Provider ID: 107522
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
License Type: NP
Provider ID: 287227
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN
License Type: NP
Provider ID: 287227
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
License Type: NP
Provider ID: 107522
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
License Type: NP
Provider ID: 107522
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PRACTITIONER

HAMID, WAHIDA

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95001707

NPI: 1164812293

Provider English Spoken: Y

Provider Language(s) Spoken: Persian, Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95001707

NPI: 1164812293

Provider English Spoken: Y

Provider Language(s) Spoken: Persian, Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95009329

NPI: 1780177147

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95009329

NPI: 1780177147

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

License Type: NP

Provider ID: 107522

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

License Type: NP

Provider ID: 107522

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP

Provider ID: 25729

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

- *Phone: (619) 515-2499*
- *After Hours Phone: (619) 515-2499*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP

Provider ID: 25729

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

- *Phone: (619) 515-2499*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 25729
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 25729
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA
License Type: NP
Provider ID: 25729
Provider Gender: Female
License Number: NP6782
NPI: 1548292626
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

MANGENE, CYNTHIA
License Type: NP
Provider ID: 25729
Provider Gender: Female
License Number: NP6782
NPI: 1548292626
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
License Type: NP
Provider ID: 110598
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
License Type: NP
Provider ID: 110598
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 165 S 1ST ST
  EL CAJON, CA 92019
- *Phone: (619) 312-0347*
- *After Hours Phone: (619) 312-0347*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 107522
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 525 E MAIN ST
  EL CAJON, CA 92020
- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 107522
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 525 E MAIN ST
  EL CAJON, CA 92020
- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 107522
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 525 E MAIN ST
  EL CAJON, CA 92020
- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

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

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 107522
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

REAL, MARIA
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP17328
NPI: 1548450471
Provider English Spoken: Y
Provider Language(s) Spoken: Catalan, German, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP17328
NPI: 1548450471
Provider English Spoken: Y
Provider Language(s) Spoken: Catalan, German, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

REGEV, SHANEE

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

REGEV, SHANEE

License Type: NP

Provider ID: 287227

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

REID, EMILY

License Type: NP

Provider ID: 36508

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

REID, EMILY

License Type: NP

Provider ID: 36508

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

SWAN, MELANIE

License Type: NP

Provider ID: 25729

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

SWAN, MELANIE

License Type: NP

Provider ID: 25729

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

License Type: NP

Provider ID: 36508

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

License Type: NP

Provider ID: 36508

Provider Gender: Female

License Number: NP95001961

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1932452323
- *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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 165 S 1ST ST
  EL CAJON, CA 92019
- *Phone: (619) 312-0347*
- *After Hours Phone: (619) 312-0347*
- *Website: www.lamaestra.org*

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

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 165 S 1ST ST
  EL CAJON, CA 92019
- *Phone: (619) 312-0347*
- *After Hours Phone: (619) 312-0347*
- *Website: www.lamaestra.org*

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 165 S 1ST ST
  EL CAJON, CA 92019
- *Phone: (619) 312-0347*
- *After Hours Phone: (619) 312-0347*
- *Website: www.lamaestra.org*

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

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
License Type: NP
Provider ID: 36508
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 107522
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 107522
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

HOURIHAN, KEITH
License Type: DC
Provider ID: 110598
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

HOURIHAN, KEITH
License Type: DC
Provider ID: 110598
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619) 795-5983
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 107522
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 25729
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 25729
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 107522
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
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: CONTACT PROVIDER

CHIROPRACTOR

UY, ASHLEY
License Type: DC
Provider ID: 107522
Provider Gender: Female
License Number: DC33869
NPI: 1174059760
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

UY, ASHLEY
License Type: DC
Provider ID: 107522
Provider Gender: Female
License Number: DC33869
NPI: 1174059760
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A146838
NPI: 1720474141
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A146838
NPI: 1720474141
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A144974
NPI: 1275948473
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A144974
NPI: 1275948473
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

ALGHAMDI, ASMA
License Type: MD
Provider ID: 287227
Provider Gender: Female
License Number: A167529
NPI: 1316310840
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA
License Type: MD
Provider ID: 287227
Provider Gender: Female
License Number: A167529
NPI: 1316310840
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A183464
NPI: 1821677584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BAIN, NATALIE
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A183464
NPI: 1821677584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A148499
NPI: 1013399559
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A148499
NPI: 1013399559

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

BRUHN, JOSHUA
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A186694
NPI: 1447888284
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A186694
NPI: 1447888284
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL
License Type: DO
Provider ID: 107522
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORMAN, DANIEL

License Type: DO

Provider ID: 107522

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DOMINGUEZ, DENNIS

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: G43179

NPI: 1225063811

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DOMINGUEZ, DENNIS

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: G43179

NPI: 1225063811

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GORDON, CHRISTOPHER

License Type: MD

Provider ID: 107522

Provider Gender: Male

License Number: A83390

NPI: 1477711521

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GORDON, CHRISTOPHER
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A83390
NPI: 1477711521
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HASTANAN, CAROL
License Type: MD
Provider ID: 25729
Provider Gender: Female
License Number: A110192
NPI: 1861648461
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HASTANAN, CAROL
License Type: MD
Provider ID: 25729
Provider Gender: Female
License Number: A110192
NPI: 1861648461
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HODGKIN, EDWARD
License Type: MD
Provider ID: 107522
Provider Gender: Male
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

HODGKIN, EDWARD
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A177445
NPI: 1922619766
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

KASAWA, JOHN
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A79338
NPI: 1134230329
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KASAWA, JOHN
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A79338
NPI: 1134230329
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A161682
NPI: 1841726148
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

THORNTON
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A161682
NPI: 1841726148
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8AM-5PM

FAMILY PRACTICE

NASSIR, BASSAM
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A101888
NPI: 1386848166
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NASSIR, BASSAM
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A101888
NPI: 1386848166
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY PRACTICE

NIAZI, HARRIS

License Type: MD

Provider ID: 107522

Provider Gender: Male

License Number: A146111

NPI: 1174905871

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

NIAZI, HARRIS

License Type: MD

Provider ID: 107522

Provider Gender: Male

License Number: A146111

NPI: 1174905871

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

PUTRUS, RAMIZ

License Type: MD

Provider ID: 308887

Provider Gender: Male

License Number: A68184

NPI: 1144300534

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

181 REA AVE
EL CAJON, CA 92020

- *Phone: (619) 312-0347*
- *After Hours Phone: (619) 312-0347*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PUTRUS, RAMIZ

License Type: MD

Provider ID: 36508

Provider Gender: Male

License Number: A68184

NPI: 1144300534

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

PUTRUS, RAMIZ
License Type: MD
Provider ID: 308887
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
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ
License Type: MD
Provider ID: 36508
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A158364
NPI: 1245401298
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A158364
NPI: 1245401298
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 36508
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 110598
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 36508
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 110598
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,
Provider ID: 25729
NPI: 1104861681
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
Fax: (619) 593-7164
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

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

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,
Provider ID: 25729
NPI: 1104861681
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
Fax: (619) 593-7164
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

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

FQHC

FAMILY HLTH CTR SAN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

DIEGO-EL CAJON,
Provider ID: 107522
NPI: 1932561198
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
Fax: (619) 269-0191
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,
Provider ID: 107522
NPI: 1932561198
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
Fax: (619) 269-0191
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,
Provider ID: 110598
NPI: 1134590086
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,
Provider ID: 110598
NPI: 1134590086
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,
Provider ID: 308887
NPI: 1609849074
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

LA MAESTRA FAMILY CLINIC
181 REA AVE
EL CAJON, CA 92020
Phone: (619) 312-0347
Fax: (619) 510-4649
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,
Provider ID: 308887
NPI: 1609849074
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
181 REA AVE
EL CAJON, CA 92020
Phone: (619) 312-0347
Fax: (619) 510-4649
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 36508
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 36508
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FQHC

SAN YSIDRO HEALTH EL CAJON,
Provider ID: 287227
NPI: 1568845741
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FQHC

SAN YSIDRO HEALTH EL CAJON,
Provider ID: 287227
NPI: 1568845741
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 36508
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 36508
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

INTERNAL MEDICINE

ALWASH, MUSTAFA
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A160516
NPI: 1679936439
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

ALWASH, MUSTAFA
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A160516
NPI: 1679936439
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

AWDISHO, ALAN
License Type: DO
Provider ID: 287227
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
Provider English Spoken: Y
Provider Language(s) Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN
License Type: DO
Provider ID: 287227
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
Provider English Spoken: Y
Provider Language(s) Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DUONG, MAI

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

INTERNAL MEDICINE

DUONG, MAI
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A127798
NPI: 1629339304
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A138815
NPI: 1285079509
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A138815
NPI: 1285079509
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN
License Type: MD
Provider ID: 110598
Provider Gender: Male
License Number: A160760
NPI: 1891159620
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN
License Type: MD
Provider ID: 110598
Provider Gender: Male
License Number: A160760
NPI: 1891159620
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

MALINAK, JAMES
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: G52238
NPI: 1497867501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No

IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MALINAK, JAMES
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: G52238
NPI: 1497867501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MANSY, TAMARA
License Type: MD
Provider ID: 287227
Provider Gender: Female
License Number: A164238
NPI: 1396277737
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MANSY, TAMARA
License Type: MD
Provider ID: 287227
Provider Gender: Female
License Number: A164238
NPI: 1396277737
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A138568
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A138568
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MICHAEL, RAMI
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A144513
NPI: 1467871673
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MICHAEL, RAMI
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A144513
NPI: 1467871673
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

NADI, FAHIMA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A175325

NPI: 1770072290

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Pashto, Persian, Urdu*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INTERNAL MEDICINE

NADI, FAHIMA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A175325

NPI: 1770072290

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Pashto, Persian, Urdu*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INTERNAL MEDICINE

NARAYAN, ARCHANA

License Type: MD

Provider ID: 287227

Provider Gender: Female

License Number: A101773

NPI: 1003053950

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Kannada*

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INTERNAL MEDICINE

NARAYAN, ARCHANA

License Type: MD

Provider ID: 287227

Provider Gender: Female

License Number: A101773

NPI: 1003053950

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Kannada*

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 107522
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 107522
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

REDDY, ARJUN
License Type: MD
Provider ID: 129312
Provider Gender: Male
NPI: 1730132457
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
COMMUNITY CARE IPA LLC
5442 SYCUAN RD
EL CAJON, CA 92019
Phone: (619) 445-0707
Fax: (619) 445-0988
After Hours Phone: (619) 445-0707
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

INTERNAL MEDICINE	INTERNAL MEDICINE	INTERNAL MEDICINE
ROUEL, WADI *License Type: MD* *Provider ID: 110598* *Provider Gender: Male* *License Number: C55979* *NPI: 1740254713* *Provider English Spoken: Y* *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac* *Cultural Competency: N* *Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL* *Board Certified: No* *LA MAESTRA FAMILY CLINIC* 1032 BROADWAY EL CAJON, CA 92021 *Phone: (619) 795-5983* *After Hours Phone: (619) 795-5983* *Website: www.lamaestra.org* *Medi-Cal Open Panel: Yes* *Min/Max Age: 0\None* *American Sign Language (ASL): N* *Accessibility: CONTACT PROVIDER* *Hours: M-F 8:30AM-5:30PM*	**ROUEL, WADI** *License Type: MD* *Provider ID: 36508* *Provider Gender: Male* *License Number: C55979* *NPI: 1740254713* *Provider English Spoken: Y* *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac* *Cultural Competency: N* *Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL* *Board Certified: No* *LA MAESTRA FAMILY CLINIC* 165 S 1ST ST EL CAJON, CA 92019 *Phone: (619) 269-1262* *After Hours Phone: (619) 269-1262* *Website: www.lamaestra.org* *Medi-Cal Open Panel: Yes* *Min/Max Age: 0\None* *American Sign Language (ASL): N* *Accessibility: CONTACT PROVIDER* *Hours: M-TU 8AM-5PM TH-F 8AM-5PM*	**ROUEL, WADI** *License Type: MD* *Provider ID: 36508* *Provider Gender: Male* *License Number: C55979* *NPI: 1740254713* *Provider English Spoken: Y* *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac* *Cultural Competency: N* *Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL* *Board Certified: No* *LA MAESTRA FAMILY CLINIC* 165 S 1ST ST EL CAJON, CA 92019 *Phone: (619) 269-1262* *After Hours Phone: (619) 269-1262* *Website: www.lamaestra.org* *Medi-Cal Open Panel: Yes* *Min/Max Age: 0\None* *American Sign Language (ASL): N* *Accessibility: CONTACT PROVIDER* *Hours: M-TU 8AM-5PM TH-F 8AM-5PM*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

INTERNAL MEDICINE

ROUEL, WADI

License Type: MD

Provider ID: 110598

Provider Gender: Male

License Number: C55979

NPI: 1740254713

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021

- *Phone: (619) 795-5983*
- *After Hours Phone: (619) 795-5983*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

License Type: MD

Provider ID: 287227

Provider Gender: Female

License Number: A159247

NPI: 1972946770

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

License Type: MD

Provider ID: 287227

Provider Gender: Female

License Number: A159247

NPI: 1972946770

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON

License Type: MD

Provider ID: 287227

Provider Gender: Male

License Number: C144411

NPI: 1790744795

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Armenian, Hebrew*

Cultural Competency: N

Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: C144411
NPI: 1790744795
Provider English Spoken: Y
Provider Language(s) Spoken: Armenian, Hebrew
Cultural Competency: N
Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YOON, TAE HYUN
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: C161090
NPI: 1508918178
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

YOON, TAE HYUN
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: C161090
NPI: 1508918178
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 287227
Provider Gender: Male
License Number: A96002
NPI: 1730258401
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN
License Type: MD

Provider ID: 287227
Provider Gender: Male
License Number: A96002
NPI: 1730258401
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
License Type: DO

Provider ID: 107522
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO

Provider ID: 107522

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, Sharp Grossmont Hospital

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp

Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

License Type: MD

Provider ID: 110598

Provider Gender: Female

License Number: G50634

NPI: 1285687350

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Urdu*

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

- 1032 BROADWAY
  EL CAJON, CA 92021
- *Phone: (619) 795-5991*
- *After Hours Phone: (619) 795-5991*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-6PM SA 8AM-2PM*

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

License Type: MD

Provider ID: 110598

Provider Gender: Female

License Number: G50634

NPI: 1285687350

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Urdu*

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

- 1032 BROADWAY
  EL CAJON, CA 92021
- *Phone: (619) 795-5991*
- *After Hours Phone: (619) 795-5991*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-6PM SA 8AM-2PM*

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A72005

NPI: 1649208711

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

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

- 525 E MAIN ST
  EL CAJON, CA 92020
- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 107522
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS 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: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 107522
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
- *Phone: (619) 515-2498*
- *After Hours Phone: (619) 515-2498*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 107522
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 107522
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

JARDON, JAVIER
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

JARDON, JAVIER
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

MANI, NASRIN
License Type: MD
Provider ID: 287227
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

MANI, NASRIN
License Type: MD
Provider ID: 287227
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A127706
NPI: 1790054393
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, French, Italian, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A127706
NPI: 1790054393
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, French, Italian, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

PONS, MAURICIO
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A87650
NPI: 1376723759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A87650
NPI: 1376723759
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A120584
NPI: 1285888628
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A120584
NPI: 1285888628
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA
License Type: MD
Provider ID: 36508
Provider Gender: Female
License Number: A81682
NPI: 1992847263
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, French,*

Spanish
Cultural Competency: N
Board Certified: 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: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA
License Type: MD
Provider ID: 36508
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Board Certified: 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: CONTACT PROVIDER

PEDIATRICS

ALWAHAB, AREEJ
License Type: MD
Provider ID: 308468
Provider Gender: Female
NPI: 1497138002
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST BERNARDINE MED CTR, KAISER FOUNDATION HOSPITAL SAN DIEGO
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 36508
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

License Type: MD

Provider ID: 110598

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619) 795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

CONE, STEPHANIE

License Type: MD

Provider ID: 110598

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619) 795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

CONE, STEPHANIE

License Type: MD

Provider ID: 36508

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRICS

FLEMING, TARA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A152462

NPI: 1972965242

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

FLEMING, TARA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A152462

NPI: 1972965242

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

JACKSON, DANA

License Type: DO

Provider ID: 107522

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

JACKSON, DANA

License Type: DO

Provider ID: 107522

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation:

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

JONES, SETAREH
License Type: MD
Provider ID: 36508
Provider Gender: Female
License Number: A110010
NPI: 1033441316
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PEDIATRICS

JONES, SETAREH
License Type: MD
Provider ID: 110598
Provider Gender: Female
License Number: A110010
NPI: 1033441316
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5983
After Hours Phone: (619) 795-5983
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JONES, SETAREH
License Type: MD
Provider ID: 36508
Provider Gender: Female
License Number: A110010
NPI: 1033441316
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

JONES, SETAREH

License Type: MD

Provider ID: 110598

Provider Gender: Female

License Number: A110010

NPI: 1033441316

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5983

After Hours Phone: (619) 795-5983

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

KODSI, ALICIA

License Type: MD

Provider ID: 107522

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: CONTACT PROVIDER

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

PEDIATRICS

KODSI, ALICIA

License Type: MD

Provider ID: 107522

Provider Gender: Female

License Number: A147976

NPI: 1932514353

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

NAGNUR, PRITI

License Type: MD

Provider ID: 25729

Provider Gender: Female

License Number: A170055

NPI: 1316289929

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Kannada

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

NAGNUR, PRITI
License Type: MD
Provider ID: 25729
Provider Gender: Female
License Number: A170055
NPI: 1316289929
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

NAIK, SHILPA
License Type: MD
Provider ID: 285853
Provider Gender: Female
NPI: 1902156904
Provider English Spoken: Y
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, VI
License Type: MD
Provider ID: 285862
Provider Gender: Female
NPI: 1053540534
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
844 JACKMAN ST
EL CAJON, CA 92020
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

PINTO, ANITA
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 285966
Provider Gender: Female
NPI: 1477663722
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
844 JACKMAN ST
EL CAJON, CA 92020
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A134995
NPI: 1508209651
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Portuguese, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 287227
Provider Gender: Male
License Number: A134995
NPI: 1508209651
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Portuguese, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA
License Type: PA
Provider ID: 110598
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA
License Type: PA
Provider ID: 36508
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA
License Type: PA
Provider ID: 110598
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA
License Type: PA
Provider ID: 36508
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ARMENTA, JORGE
License Type: PA
Provider ID: 36508
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347

After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE
License Type: PA
Provider ID: 36508
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 36508
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 110598
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 36508
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 110598
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

PATEL, SHREYA
License Type: PA
Provider ID: 25729
Provider Gender: Female
License Number: PA18719
NPI: 1447468137
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

PATEL, SHREYA
License Type: PA
Provider ID: 25729
Provider Gender: Female
License Number: PA18719
NPI: 1447468137
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

8:30AM-5:30PM

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

License Type: PA
Provider ID: 287227
Provider Gender: Female
License Number: PA22872
NPI: 1114041621
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

License Type: PA
Provider ID: 287227
Provider Gender: Female
License Number: PA22872
NPI: 1114041621
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

TURNER, ERIC

License Type: PA
Provider ID: 25729
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

License Type: PA
Provider ID: 107522
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

TURNER, ERIC

License Type: PA

Provider ID: 25729

Provider Gender: Male

License Number: PA55067

NPI: 1669756128

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

TURNER, SHEREENA

License Type: PA

Provider ID: 107522

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PODIATRIST

JUAREZ, LETICIA

License Type: DPM

Provider ID: 107522

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PODIATRIST

JUAREZ, LETICIA

License Type: DPM

Provider ID: 107522

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 107522
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 107522
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
License Type: PT
Provider ID: 107522
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
License Type: PT
Provider ID: 107522
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY
License Type: PT
Provider ID: 287227
Provider Gender: Female
License Number: PT40025
NPI: 1952982761
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY
License Type: PT
Provider ID: 287227
Provider Gender: Female
License Number: PT40025
NPI: 1952982761
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

GONZALEZ, JUSTINE ARIEL
License Type: PT
Provider ID: 107522
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

GONZALEZ, JUSTINE ARIEL
License Type: PT
Provider ID: 107522
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY
License Type: PT
Provider ID: 287227
Provider Gender: Male
License Number: PT42665
NPI: 1912640053
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY
License Type: PT
Provider ID: 287227
Provider Gender: Male
License Number: PT42665
NPI: 1912640053
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
License Type: PT
Provider ID: 107522
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
License Type: PT
Provider ID: 107522
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

ENCINITAS

PEDIATRICS

BRION, SONJA
License Type: MD
Provider ID: 205039
Provider Gender: Female
NPI: 1306817317
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

MENDENHALL, ANNA
License Type: MD
Provider ID: 204809
Provider Gender: Female
NPI: 1639140650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

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

PEDIATRICS

TERRY, AMANDA
License Type: MD
Provider ID: 205166
Provider Gender: Female
NPI: 1861770885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

TOLBA, KAMEI
License Type: MD
Provider ID: 204458
Provider Gender: Male
NPI: 1144221763
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ESCONDIDO

CERTIFIED NURSE PRACTITIONER

CARNEY, AMY
License Type: NP
Provider ID: 289855
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

W 9AM-5PM
TH-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

CARNEY, AMY
License Type: NP
Provider ID: 289855
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
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: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS
License Type: NP
Provider ID: 289769
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS
License Type: NP
Provider ID: 289769
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
License Type: NP
Provider ID: 289769
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
License Type: NP
Provider ID: 289769
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROBINSON, DEAN
License Type: DC
Provider ID: 289876
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
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: CONTACT PROVIDER

CHIROPRACTOR

ROBINSON, DEAN
License Type: DC
Provider ID: 289876
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ZECHA, RONALD
License Type: DC
Provider ID: 289876
Provider Gender: Male
License Number: DC28605
NPI: 1427252121
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

CHIROPRACTOR

ZECHA, RONALD
License Type: DC
Provider ID: 289876
Provider Gender: Male
License Number: DC28605
NPI: 1427252121
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 289769
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 289769
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AVILA, MICHAEL
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: A159727
NPI: 1962936450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FAMILY PRACTICE

AVILA, MICHAEL
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: A159727
NPI: 1962936450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 289855
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-8PM
TH-F 8AM-5PM

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 289855
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: CONTACT PROVIDER
Hours: M-W 8AM-8PM
TH-F 8AM-5PM

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 289876
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

COBIAN, VANESSA
License Type: MD
Provider ID: 289855
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: CONTACT PROVIDER
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

COBIAN, VANESSA
License Type: MD
Provider ID: 289855
Provider Gender: Female
License Number: A145349
NPI: 1134513039
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

COX, VICTORIA
License Type: MD
Provider ID: 289769
Provider Gender: Female

License Number: C171064
NPI: 1093087819
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

COX, VICTORIA
License Type: MD
Provider ID: 289769
Provider Gender: Female
License Number: C171064
NPI: 1093087819
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 304810
Provider Gender: Female
License Number: 20A14772

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 304810
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUR, JATINDER
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

KAUR, JATINDER
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

LAI, AMARA
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 289855
Provider Gender: Female
License Number: A120348
NPI: 1790912855
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FAMILY PRACTICE

LAI, AMARA
License Type: MD
Provider ID: 289855
Provider Gender: Female
License Number: A120348
NPI: 1790912855
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FAMILY PRACTICE

MCHENRY, KATHRYN
License Type: DO
Provider ID: 289876
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FAMILY PRACTICE

MCHENRY, KATHRYN
License Type: DO
Provider ID: 289876
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

NAKAMURA, MELANIE
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A107557
NPI: 1104022672
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

NAKAMURA, MELANIE
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A107557
NPI: 1104022672
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FAMILY PRACTICE

PATEL, JITENBHAI
License Type: MD
Provider ID: 289855
Provider Gender: Male
License Number: A94128
NPI: 1902921406
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI
License Type: MD
Provider ID: 289876
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):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

License Type: MD

Provider ID: 289876

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

License Type: MD

Provider ID: 289855

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760) 737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAO, USHA

License Type: MD

Provider ID: 289769

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAO, USHA

License Type: MD

Provider ID: 289769

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A82173

NPI: 1699706333

Provider English Spoken: Y

Provider Language(s) Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A82173

NPI: 1699706333

Provider English Spoken: Y

Provider Language(s) Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RODARTE, GABRIEL

License Type: MD

Provider ID: 289865

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

After Hours Phone: (760) 520-8340

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

RODARTE, GABRIEL

License Type: MD

Provider ID: 289865

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SANDHU, BASANT
License Type: MD
Provider ID: 289855
Provider Gender: Male
License Number: A140398
NPI: 1265795744
Provider English Spoken: Y
Provider Language(s) Spoken: German, Hindi, Punjabi, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

SANDHU, BASANT
License Type: MD
Provider ID: 289855
Provider Gender: Male
License Number: A140398
NPI: 1265795744
Provider English Spoken: Y
Provider Language(s) Spoken: German, Hindi, Punjabi, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-8PM TH-F 8AM-5PM

FAMILY PRACTICE

SCHULTZ, JAMES
License Type: MD
Provider ID: 289855
Provider Gender: Male
License Number: G61829
NPI: 1356376164
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: G61829
NPI: 1356376164

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES
License Type: MD
Provider ID: 289855
Provider Gender: Male
License Number: G61829
NPI: 1356376164
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: G61829
NPI: 1356376164
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TANTOD, KULIN
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: A109655
NPI: 1902058928
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

TANTOD, KULIN
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: A109655
NPI: 1902058928
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

THOMPSON, CHERYL
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A102687
NPI: 1548429863
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FAMILY PRACTICE

THOMPSON, CHERYL
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A102687
NPI: 1548429863
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FQHC

DAP HEALTH-CENTRO MEDICO ESCONDIDO,
Provider ID: 313071
NPI: 1023349883
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

DAP HEALTH-CENTRO MEDICO ESCONDIDO,
Provider ID: 313071
NPI: 1023349883
Provider English Spoken: Y
Cultural Competency: N
DAP HEALTH INC
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

ESCONDIDO FAMILY HEALTH CENTER,
Provider ID: 304810
NPI: 1417640491
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (619) 515-2474
After Hours Phone: (619) 515-2474
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

ESCONDIDO FAMILY HEALTH CENTER,
Provider ID: 304810
NPI: 1417640491
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (619) 515-2474
After Hours Phone: (619) 515-2474
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,
Provider ID: 289876
NPI: 1598703647
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,
Provider ID: 289876
NPI: 1598703647
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,
Provider ID: 289873
NPI: 1437335353
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,
Provider ID: 289873
NPI: 1437335353
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,
Provider ID: 289865
NPI: 1265618185
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,
Provider ID: 289865
NPI: 1265618185
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,
Provider ID: 289855
NPI: 1720264641
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,
Provider ID: 289855
NPI: 1720264641
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,
Provider ID: 289769
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (760) 745-7847
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,
Provider ID: 289769
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (760) 745-7847
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes

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

INTERNAL MEDICINE

AGUERO, AMETHYST
License Type: DO
Provider ID: 304810
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST
License Type: DO
Provider ID: 304810
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE
License Type: MD
Provider ID: 289769
Provider Gender: Male
License Number: G58033
NPI: 1184728586
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE
License Type: MD
Provider ID: 289769
Provider Gender: Male
License Number: G58033
NPI: 1184728586
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL

ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CHEN, MARGARET
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A61751
NPI: 1659305084
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Modern Greek, Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

INTERNAL MEDICINE

CHEN, MARGARET
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A61751
NPI: 1659305084
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Modern Greek, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: C53062
NPI: 1679102461
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH
License Type: MD
Provider ID: 289876
Provider Gender: Male

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Number: C53062
NPI: 1679102461
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 289865
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: A56054
NPI: 1467407411
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

AGUILAR, EDITA
License Type: MD
Provider ID: 289865
Provider Gender: Female
License Number: A56054

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

ALDANA, NANCY
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: A62467
NPI: 1558371963
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
After Hours Phone: (760) 520-8340
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

ALDANA, NANCY
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: A62467
NPI: 1558371963
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
After Hours Phone: (760) 520-8340
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CHOW, BYRON
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: A78116
NPI: 1619907607
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760)

520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CHOW, BYRON
License Type: MD
Provider ID: 289876
Provider Gender: Male
License Number: A78116
NPI: 1619907607
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

COHEN, CARA
License Type: MD
Provider ID: 305159
Provider Gender: Female
NPI: 1215021274
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

COULLAHAN, JESSICA
License Type: MD
Provider ID: 305160
Provider Gender: Female
NPI: 1750579108
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8:30AM-12PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRICS

CURET, ZULMA

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A119661

NPI: 1841561107

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

- *Phone: (760) 520-8100*
- *After Hours Phone: (760) 520-8100*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CURET, ZULMA

License Type: MD

Provider ID: 289876

Provider Gender: Female

License Number: A119661

NPI: 1841561107

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

460 N ELM ST
ESCONDIDO, CA 92025

- *Phone: (760) 520-8100*
- *After Hours Phone: (760) 520-8100*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PEDIATRICS

DOSHI, NEELIMA

License Type: MD

Provider ID: 289873

Provider Gender: Female

License Number: A67626

NPI: 1417921578

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

426 N DATE ST
ESCONDIDO, CA 92025

- *Phone: (760) 690-5900*
- *After Hours Phone: (760) 690-5900*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PEDIATRICS

DOSHI, NEELIMA

License Type: MD

Provider ID: 289873

Provider Gender: Female

License Number: A67626

NPI: 1417921578

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

SONG, JOYCE
License Type: DO
Provider ID: 305166
Provider Gender: Female
NPI: 1417510694
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

STRAZICICH, KARLA
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A45413
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: CONTACT PROVIDER

PEDIATRICS

STRAZICICH, KARLA
License Type: MD
Provider ID: 289876
Provider Gender: Female
License Number: A45413
NPI: 1134154958
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA
License Type: MD
Provider ID: 289873
Provider Gender: Female

License Number: G83438
NPI: 1730288747
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA
License Type: MD
Provider ID: 289873
Provider Gender: Female
License Number: G83438
NPI: 1730288747
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
License Type: PA
Provider ID: 289769
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN
License Type: PA
Provider ID: 289769
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider ID: 289769
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA
License Type: PA
Provider ID: 289769
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

NEGRON, RICARDO
License Type: DPM
Provider ID: 289855
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence St Joseph Hospital
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

NEGRON, RICARDO
License Type: DPM
Provider ID: 289855
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence St Joseph Hospital
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FALLBROOK

CERTIFIED NURSE PRACTITIONER

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95009340
NPI: 1093288730
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

License Type: NPF

Provider ID: 298304

Provider Gender: Female

License Number: NP95009340

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

License Type: NPF

Provider ID: 298304

Provider Gender: Female

License Number: NP95009340

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF

Provider ID: 298304

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s) Spoken: Sign Language

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

After Hours Phone: (760) 723-6200

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF

Provider ID: 298304

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

Cultural Competency: N
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: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  TU 8AM-12:30PM
  W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  TU 8AM-12:30PM
  W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  TU 8AM-12:30PM
  W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760) 723-6200*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-4PM*
  TU 8AM-12:30PM
  W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Sign Language*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 321 E ALVARADO ST FALLBROOK, CA 92028
- *Phone: (760) 723-6200*
- *After Hours Phone: (760)*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 298304
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Number: NP95003447
NPI: 1245695006
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
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: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE

License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KIRKLAND, STEPHANIE
License Type: NP
Provider ID: 298304
Provider Gender: Female
License Number: NP95013844
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
License Type: NP
Provider ID: 298304
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
License Type: NP
Provider ID: 298304
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
License Type: NP
Provider ID: 298304
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
License Type: NP
Provider ID: 298304
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY
License Type: NP
Provider ID: 298304
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M 8AM-4PM
TU 8AM-12:30PM
W-TH 8AM-5PM

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PRACTITIONER

RACKHAM, KELLY

License Type: NP

Provider ID: 298304

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

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

Cultural Competency: N

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

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

License Type: NP

Provider ID: 298304

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

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

Cultural Competency: N

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

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: 289871

NPI: 1982756086

- *Provider English Spoken: Y*

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD
FALLBROOK, CA 92028

- *Phone: (760) 451-4720*

Fax: (760) 451-4700

- *After Hours Phone: (760) 451-4720*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: 289871

NPI: 1982756086

- *Provider English Spoken: Y*

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD
FALLBROOK, CA 92028

- *Phone: (760) 451-4720*

Fax: (760) 451-4700

- *After Hours Phone: (760) 451-4720*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 298304
NPI: 1649662719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 298304
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 298304
NPI: 1316501562
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 298304
NPI: 1649662719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 298304
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 298304
NPI: 1316501562
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-4PM
TU 8:30AM-12:30PM
W-TH 8:30AM-4PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE
License Type: MD
Provider ID: 289871
Provider Gender: Male
License Number: G37412
NPI: 1538234190
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
After Hours Phone: (760) 451-4720
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE
License Type: MD
Provider ID: 289871
Provider Gender: Male
License Number: G37412
NPI: 1538234190
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
After Hours Phone: (760) 451-4720
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

PEDIATRICS

DEL RE, AMANDA
License Type: MD
Provider ID: 201533
Provider Gender: Female
NPI: 1548499957
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

ROBINSON, DAISY
License Type: MD
Provider ID: 204471
Provider Gender: Female
NPI: 1659389740
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-4PM

PEDIATRICS

VU, WENDY
License Type: MD
Provider ID: 289871
Provider Gender: Female
License Number: A169529
NPI: 1508148370
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4770
After Hours Phone: (760) 451-4770
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-7:30PM SA 8AM-5PM

PEDIATRICS

VU, WENDY
License Type: MD
Provider ID: 289871
Provider Gender: Female
License Number: A169529
NPI: 1508148370
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4770
After Hours Phone: (760) 451-4770
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-7:30PM SA 8AM-5PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: DO
Provider ID: 289864
Provider Gender: Male
License Number: 20A9393
NPI: 1245311216
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 949 PALM AVE
  IMPERIAL BEACH, CA 91932
- *Phone: (619) 429-3733*
- *After Hours Phone: (619) 429-3733*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8:30AM-9PM*
  F 8:30AM-5PM
  SA 8:30AM-2PM

FAMILY PRACTICE

JOHNSON, DANIEL

License Type: DO
Provider ID: 289864
Provider Gender: Male
License Number: 20A9393
NPI: 1245311216
- *Provider English Spoken: Y*
- *Provider Language(s) 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: CONTACT PROVIDER*
- *Hours: M-TH 8:30AM-9PM*
  F 8:30AM-5PM
  SA 8:30AM-2PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 289864
NPI: 1790718351
- *Provider English Spoken: Y*

Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
- 949 PALM AVE
  IMPERIAL BEACH, CA 91932
- *Phone: (619) 429-3733*

Fax: (619) 628-5550
- *After Hours Phone: (619) 429-3733*
- *Website: www.ihpsocal.org*

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

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 289864
NPI: 1790718351
- *Provider English Spoken: Y*

Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
- 949 PALM AVE
  IMPERIAL BEACH, CA 91932
- *Phone: (619) 429-3733*

Fax: (619) 628-5550
- *After Hours Phone: (619) 429-3733*
- *Website: www.ihpsocal.org*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

INTERNAL MEDICINE

RYAN, DANA
License Type: MD
Provider ID: 289864
Provider Gender: Female
License Number: A66830
NPI: 1780609990
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RYAN, DANA
License Type: MD
Provider ID: 289864
Provider Gender: Female
License Number: A66830
NPI: 1780609990
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
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: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA
License Type: MD
Provider ID: 289864
Provider Gender: Female
License Number: A51447
NPI: 1154409035
Provider English Spoken: Y
Provider Language(s) Spoken: Serbian, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA
License Type: MD
Provider ID: 289864
Provider Gender: Female
License Number: A51447
NPI: 1154409035

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

JULIAN

CLINIC OUTPATIENT

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: 307283
NPI: 1235804139
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2721 WASHINGTON ST
JULIAN, CA 92036
Phone: (619) 662-4100
Fax: (760) 765-1278
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CLINIC OUTPATIENT

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: 307283
NPI: 1235804139
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2721 WASHINGTON ST
JULIAN, CA 92036
Phone: (619) 662-4100
Fax: (760) 765-1278
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider ID: 307283
Provider Gender: Male
License Number: 20A11088
NPI: 1922314145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2721 WASHINGTON ST
JULIAN, CA 92036
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

WYLIE, BLAKE
License Type: DO
Provider ID: 307283
Provider Gender: Male

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FQHC

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: 307283
NPI: 1235804139
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2721 WASHINGTON ST
JULIAN, CA 92036
Phone: (619) 662-4100
Fax: (760) 765-1278
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,
Provider ID: 307283
NPI: 1235804139
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2721 WASHINGTON ST
JULIAN, CA 92036
Phone: (619) 662-4100
Fax: (760) 765-1278
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN
License Type: MD
Provider ID: 279603
Provider Gender: Female
NPI: 1174504757
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

GANDHI, SHEETAL
License Type: MD
Provider ID: 205020
Provider Gender: Female
NPI: 1700858859

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4150 REGENTS PARK ROW STE 355
LA JOLLA, CA 92037
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

PARSONS, GENEVIEVE
License Type: MD
Provider ID: 206224
Provider Gender: Female
NPI: 1699700914
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

ROBERTS, KENDALL
License Type: MD
Provider ID: 205024
Provider Gender: Male
NPI: 1265762033
Provider English Spoken: Y
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

TUNG, VIVIAN
License Type: MD
Provider ID: 204348
Provider Gender: Female
NPI: 1285665133
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LA MESA

PEDIATRICS

MOLINOS, NICOLE
License Type: MD
Provider ID: 279283
Provider Gender: Female
NPI: 1538685524
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942
Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619) 698-2184
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA
License Type: DC
Provider ID: 289859
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

PAGE, BIANCA
License Type: DC
Provider ID: 289859
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 289859
Provider Gender: Female

License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

FERRAIOLO, NATALIE
License Type: MD
Provider ID: 289859
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY
License Type: MD
Provider ID: 289859
Provider Gender: Female
License Number: A115342
NPI: 1851602270
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 440-2751
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY
License Type: MD
Provider ID: 289859
Provider Gender: Female
License Number: A115342
NPI: 1851602270
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 440-2751
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NEIGHBORHOOD HEALTHCARE LAKESIDE,
Provider ID: 289859
NPI: 1932384120
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
Fax: (360) 462-2744
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE LAKESIDE,
Provider ID: 289859
NPI: 1932384120
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
Fax: (360) 462-2744
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL PRACTICE

MANNINO, ELIZABETH
License Type: MD
Provider ID: 289859
Provider Gender: Female
License Number: A43914
NPI: 1548290463
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL PRACTICE

MANNINO, ELIZABETH
License Type: MD
Provider ID: 289859
Provider Gender: Female
License Number: A43914
NPI: 1548290463
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

MCFARLAND, NATHAN
License Type: MD
Provider ID: 289859
Provider Gender: Male
License Number: A75411

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

INTERNAL MEDICINE

MCFARLAND, NATHAN
License Type: MD
Provider ID: 289859
Provider Gender: Male
License Number: A75411
NPI: 1265462196
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Italian, Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LEMON GROVE

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
License Type: NP
Provider ID: 46661
Provider Gender: Female
License Number: NP95009933
NPI: 1831557024
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
License Type: NP
Provider ID: 46661
Provider Gender: Female
License Number: NP95009933
NPI: 1831557024
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA
License Type: NP
Provider ID: 46661
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA
License Type: NP
Provider ID: 46661
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 46661
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 46661
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

CHOU, BILL

License Type: DO

Provider ID: 46661

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

FAMILY PRACTICE

CHOU, BILL

License Type: DO

Provider ID: 46661

Provider Gender: Male

License Number: 20A14794

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: CONTACT PROVIDER

Hours: M-F 9AM-5PM

FAMILY PRACTICE

DORN, TIA

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: C172318

NPI: 1285074740

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

FAMILY PRACTICE

DORN, TIA

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: C172318

NPI: 1285074740

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

FAMILY PRACTICE

DORN, TIA

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: C172318

NPI: 1285074740

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY PRACTICE

KIM, YUHEE

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIM, YUHEE

License Type: MD

Provider ID: 46661

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 46661

NPI: 1427282466

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

Fax: (619) 825-9577

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 46661

NPI: 1427282466

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

Fax: (619) 825-9577

After Hours Phone: (619) 515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

INTERNAL MEDICINE

GALLARES, DANIEL

License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: A165925
NPI: 1245689488
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GALLARES, DANIEL
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: A165925
NPI: 1245689488
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: A108228
NPI: 1629277322
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 7592 BROADWAY
  LEMON GROVE, CA 91945
- *Phone: (619) 515-2550*
- *After Hours Phone: (619) 515-2550*
- *Website: N/A*

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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 7592 BROADWAY
  LEMON GROVE, CA 91945
- *Phone: (619) 515-2550*
- *After Hours Phone: (619) 515-2550*
- *Website: N/A*

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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 7592 BROADWAY
  LEMON GROVE, CA 91945
- *Phone: (619) 515-2550*
- *After Hours Phone: (619) 515-2550*
- *Website: N/A*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

License Type: MD
Provider ID: 46661
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s)*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 46661
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 46661
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 46661
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

JACKSON, DANA
License Type: DO
Provider ID: 46661
Provider Gender: Female
License Number: 20A14119
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

JACKSON, DANA
License Type: DO
Provider ID: 46661
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

JACKSON, DANA
License Type: DO
Provider ID: 46661
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PHYSICIANS ASSISTANT

FLEMING, DAVID
License Type: PA
Provider ID: 46661
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

FLEMING, DAVID
License Type: PA
Provider ID: 46661
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
License Type: NP
Provider ID: 109486
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
License Type: NP
Provider ID: 25518
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
License Type: NP
Provider ID: 109486
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
License Type: NP
Provider ID: 25518
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765
Provider English Spoken: Y
Provider Language(s) Spoken: Marathi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PRACTITIONER

DHARKAR-SURBER, SAPNA

License Type: NP

Provider ID: 58606

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

- *Phone: (619) 434-7308*

Fax: (619) 434-7310

- *After Hours Phone: (619) 434-7308*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

License Type: NP

Provider ID: 25518

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

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

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.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-6PM F 8AM-5PM*

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

License Type: NP

Provider ID: 109486

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

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

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

2101 GRANGER AVE
NATIONAL CITY, CA 91950

- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

License Type: NP

Provider ID: 25518

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

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

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
License Type: NP
Provider ID: 109486
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH
License Type: NP
Provider ID: 121626
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH
License Type: NP
Provider ID: 121626
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: 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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP17328
NPI: 1548450471
Provider English Spoken: Y
Provider Language(s) Spoken: Catalan, German, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP17328
NPI: 1548450471
Provider English Spoken: Y
Provider Language(s) Spoken: Catalan, German, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
License Type: NP
Provider ID: 58606
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CHIROPRACTOR

HOURIHAN, KEITH
License Type: DC
Provider ID: 58606
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: TH 8AM-2PM

CHIROPRACTOR

HOURIHAN, KEITH
License Type: DC
Provider ID: 58606
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TH 8AM-2PM

FAMILY PRACTICE

ALGHAMDI, ASMA
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: A167529
NPI: 1316310840
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ALGHAMDI, ASMA
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: A167529
NPI: 1316310840
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ANDAYA, MIKHAEL
License Type: MD
Provider ID: 121626
Provider Gender: Male
License Number: A176878
NPI: 1780189209
Provider English Spoken: Y
Provider Language(s)

Spoken: Tagalog
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ANDAYA, MIKHAEL
License Type: MD
Provider ID: 121626
Provider Gender: Male
License Number: A176878
NPI: 1780189209
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAEZ, BEATRICE
License Type: MD
Provider ID: 25518
Provider Gender: Female
License Number: A74777
NPI: 1245372507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

FAMILY PRACTICE

BAEZ, BEATRICE
License Type: MD
Provider ID: 25518
Provider Gender: Female
License Number: A74777
NPI: 1245372507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY PRACTICE

CAMPBELL, BRIANNA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A157488

NPI: 1316479892

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

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 2400 E 8TH ST STE A NATIONAL CITY, CA 91950
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CAMPBELL, BRIANNA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A157488

NPI: 1316479892

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

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 2400 E 8TH ST STE A NATIONAL CITY, CA 91950
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CANLAS, AVELINO

License Type: MD

Provider ID: 25518

Provider Gender: Male

License Number: A74854

NPI: 1275682528

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

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Board Certified: No

OPERATION SAMAHAN

- 2743 HIGHLAND AVE NATIONAL CITY, CA 91950
- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-6PM F 8AM-5PM*

FAMILY PRACTICE

CANLAS, AVELINO

License Type: MD

Provider ID: 25518

Provider Gender: Male

License Number: A74854

NPI: 1275682528

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

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Board Certified: No

OPERATION SAMAHAN

- 2743 HIGHLAND AVE NATIONAL CITY, CA 91950

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD
Provider ID: 25520
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

License Type: MD
Provider ID: 25520
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

License Type: MD
Provider ID: 25520
Provider Gender: Male
License Number: A55469
NPI: 1720181829
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

License Type: MD
Provider ID: 25520
Provider Gender: Male
License Number: A55469
NPI: 1720181829

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

DILLON, MAYRA
License Type: MD
Provider ID: 25520
Provider Gender: Female
License Number: A112571
NPI: 1629232715
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

DILLON, MAYRA
License Type: MD
Provider ID: 25520
Provider Gender: Female
License Number: A112571
NPI: 1629232715
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

LANUZA, MARK J
License Type: DO
Provider ID: 121626
Provider Gender: Male
License Number: 20A18460
NPI: 1992230593
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

LANUZA, MARK J

License Type: DO

Provider ID: 121626

Provider Gender: Male

License Number: 20A18460

NPI: 1992230593

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619) 515-2399

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

LAW, KAREN

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LAW, KAREN

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified: No

IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

License Type: MD

Provider ID: 42839

Provider Gender: Male

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL 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: CONTACT PROVIDER

FAMILY PRACTICE

LEUTE, ERIC
License Type: MD
Provider ID: 42839
Provider Gender: Male
License Number: A80832
NPI: 1720171507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER
License Type: MD
Provider ID: 247959
Provider Gender: Male
License Number: A133539
NPI: 1467714436
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER
License Type: MD
Provider ID: 247959
Provider Gender: Male
License Number: A133539
NPI: 1467714436
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: 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):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOHAMEDI, NADIA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A146819

NPI: 1477947364

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

MOHAMEDI, NADIA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A146819

NPI: 1477947364

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

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: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

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

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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: CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 247959
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 247959
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: CONTACT PROVIDER

FAMILY PRACTICE

NOLASCO, JOANNA
License Type: MD
Provider ID: 25520
Provider Gender: Female
License Number: A138919
NPI: 1154749315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NOLASCO, JOANNA
License Type: MD
Provider ID: 25520
Provider Gender: Female

License Number: A138919
NPI: 1154749315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA
License Type: MD
Provider ID: 25520
Provider Gender: Male
License Number: A165184
NPI: 1336643345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA
License Type: MD
Provider ID: 25520
Provider Gender: Male
License Number: A165184
NPI: 1336643345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RICHARDSON, DANIELLE
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: A127555
NPI: 1609142892
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RICHARDSON, DANIELLE

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A127555

NPI: 1609142892

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified: No

IHP OF SOUTHERN CAL-PHP

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

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ROBERTS, POMAI

License Type: MD

Provider ID: 25520

Provider Gender: Female

License Number: A103218

NPI: 1023278314

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1136 D AVE
NATIONAL CITY, CA 91950

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

ROBERTS, POMAI

License Type: MD

Provider ID: 25520

Provider Gender: Female

License Number: A103218

NPI: 1023278314

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1136 D AVE
NATIONAL CITY, CA 91950

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 58606

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

- *Phone: (619) 434-7308*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 58606
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN
License Type: DO
Provider ID: 42839
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2806
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN
License Type: DO
Provider ID: 42839
Provider Gender: Male
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: CONTACT PROVIDER

FAMILY PRACTICE

STONES, RACHEL
License Type: MD
Provider ID: 58606
Provider Gender: Female
License Number: A167184
NPI: 1720583040
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TH 8AM-2PM

FAMILY PRACTICE

STONES, RACHEL
License Type: MD
Provider ID: 58606
Provider Gender: Female
License Number: A167184
NPI: 1720583040
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TH 8AM-2PM

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: A71304
NPI: 1972732584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON
License Type: MD
Provider ID: 42839
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: CONTACT PROVIDER

FQHC

FAMILY HEALTH CTR SD NATIONAL CITY,

Provider ID: 121626
NPI: 1417409228
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

FQHC

FAMILY HEALTH CTR SD NATIONAL CITY,
Provider ID: 121626
NPI: 1417409228
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 58606
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 58606
NPI: 1336353721
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

OPERATION SAMAHAN - NATIONAL C,
Provider ID: 25518
NPI: 1801907449

Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

FQHC

OPERATION SAMAHAN - NATIONAL C,
Provider ID: 25518
NPI: 1801907449
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,
Provider ID: 109486
NPI: 1205134517
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 434-8999
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,
Provider ID: 109486
NPI: 1205134517
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 434-8999
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

FQHC

SAN YSIDRO HEALTH NATIONAL CITY,
Provider ID: 25520
NPI: 1003869363
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619)

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

FQHC

SAN YSIDRO HEALTH NATIONAL CITY,
Provider ID: 25520
NPI: 1003869363
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PARADISE HILLS,
Provider ID: 42839
NPI: 1598907487
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2811
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PARADISE HILLS,
Provider ID: 42839
NPI: 1598907487
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2811
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,
Provider ID: 247959
NPI: 1851757215
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 434-3514
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 247959
NPI: 1851757215
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 434-3514
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 58606
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 58606
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 58606
Provider Gender: Male
License Number: C55979
NPI: 1740254713
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

ROUEL, WADI

License Type: MD

Provider ID: 58606

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619) 434-7308

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

NEUROLOGY

CANTU-REYNA, GUILLERMO

License Type: MD

Provider ID: 58606

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 798-3977

After Hours Phone: (619) 798-3977

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

License Type: MD

Provider ID: 58606

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 798-3977

After Hours Phone: (619) 798-3977

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

License Type: MD

Provider ID: 42839

Provider Gender: Female

License Number: A118227

NPI: 1851667661

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: A118227
NPI: 1851667661
Provider English Spoken: Y
Provider Language(s) Spoken: Faroese, Fataleka
Cultural Competency: N
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BAILONY, AHMAD
License Type: MD
Provider ID: 204623
Provider Gender: Male
NPI: 1790914422
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

BAILONY, MOHAMMED
License Type: MD
Provider ID: 204571
Provider Gender: Male
NPI: 1376625913
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

BONSU, BEMA
License Type: MD
Provider ID: 25520
Provider Gender: Male
License Number: C55180
NPI: 1932106986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BONSU, BEMA
License Type: MD
Provider ID: 25520
Provider Gender: Male
License Number: C55180
NPI: 1932106986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 58606
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 58606
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: CONTACT PROVIDER

PEDIATRICS

DABU, LISA
License Type: MD
Provider ID: 310258
Provider Gender: Female
NPI: 1881128254
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
502 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Phone: (619) 475-6204
Fax: (619) 475-5174
After Hours Phone: (619) 475-6204
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

DAY, CHRISTOPHER
License Type: MD
Provider ID: 121626
Provider Gender: Male
License Number: A163862
NPI: 1184121253
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

PEDIATRICS

DAY, CHRISTOPHER
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 121626
Provider Gender: Male
License Number: A163862
NPI: 1184121253
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1000 EUCLID AVE NATIONAL CITY, CA 91950
- *Phone: (619) 515-2399*
- *After Hours Phone: (619) 515-2399*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-3:30PM*
  TU 10:30AM-5:30PM
  W 8:30AM-3:30PM
  TH 10:30AM-5:30PM
  F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA
License Type: MD
Provider ID: 204715
Provider Gender: Female
NPI: 1346258787
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
- 655 EUCLID AVE STE 207 NATIONAL CITY, CA 91950
- *Phone: (619) 475-4575*

Fax: (619) 475-4578
- *After Hours Phone: (619) 475-4575*
- *Website: N/A*

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

PEDIATRICS

GARCIA, RAFAEL
License Type: MD
Provider ID: 204938
Provider Gender: Male
NPI: 1053414086
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
- 610 EUCLID AVE STE 302 NATIONAL CITY, CA 91950
- *Phone: (619) 527-7700*

Fax: (619) 527-3226
- *After Hours Phone: (619) 527-7700*
- *Website: N/A*

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

PEDIATRICS

RANA, DEBORAH
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: G88347
NPI: 1033191457
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

RANA, DEBORAH
License Type: MD
Provider ID: 42839
Provider Gender: Female
License Number: G88347
NPI: 1033191457
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, CHULA 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: CONTACT PROVIDER

PEDIATRICS

UY, CARMELITA
License Type: MD
Provider ID: 204563
Provider Gender: Female
NPI: 1154431484
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2340 E 8TH ST STE E
NATIONAL CITY, CA 91950
Phone: (619) 216-8500
Fax: (619) 216-8511
After Hours Phone: (619) 216-8511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

VALENCIA, MARILES
License Type: MD
Provider ID: 204503
Provider Gender: Female
NPI: 1275541625
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950
Phone: (619) 475-4575
Fax: (619) 475-4578

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 475-4575
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE
License Type: PA
Provider ID: 58606
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA
License Type: PA
Provider ID: 121626
Provider Gender: Female
License Number: PA55660
NPI: 1720524374
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ARMENTA, JORGE
License Type: PA
Provider ID: 58606
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA
License Type: PA
Provider ID: 121626
Provider Gender: Female
License Number: PA55660
NPI: 1720524374
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE
License Type: PA
Provider ID: 58606
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE
License Type: PA
Provider ID: 58606
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 58606
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 58606
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 58606
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

OCEANSIDE

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Korean*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Korean*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Korean*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
License Type: NP
Provider ID: 289857
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 757-5841

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (760) 757-5841
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
License Type: NP
Provider ID: 305294
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 757-5841
After Hours Phone: (760) 757-5841
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
License Type: NP
Provider ID: 289857
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
License Type: NP
Provider ID: 305294
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 757-5841
After Hours Phone: (760) 757-5841
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95017483

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1679140644
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

License Type: NP

Provider ID: 289902

Provider Gender: Male

License Number: NP95017483

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

License Type: NP

Provider ID: 289902

Provider Gender: Male

License Number: NP95017483

NPI: 1679140644

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

License Type: NPF

Provider ID: 289902

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

License Type: NPF

Provider ID: 289902

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

License Type: NPF

Provider ID: 289902

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

License Type: NPF

Provider ID: 289902

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

License Type: NPF

Provider ID: 289902

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

License Type: NPF

Provider ID: 289902

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP20497

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP20497
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF

Provider ID: 289902

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s) Spoken: Sign Language

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF

Provider ID: 289902

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s) Spoken: Sign Language

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

License Type: NPF

Provider ID: 289902

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Spoken: Sign Language
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289943
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 304702
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289899
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 304701

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Mandarin

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289902

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 289943

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

License Type: NP

Provider ID: 304702

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

517 N HORNE ST

OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289899
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 304701
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA
License Type: NPF
Provider ID: 289902
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

HOWELL, AMANDA
License Type: NP
Provider ID: 289902
Provider Gender: Female
License Number: NP95020894
NPI: 1427797943
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289899

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 304701

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289899

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: 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):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

License Type: NP

Provider ID: 304701

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

License Type: NP

Provider ID: 289902

Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

License Type: NP

Provider ID: 289902

Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

License Type: NP

Provider ID: 289902

Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

Provider English Spoken: Y

Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95020584
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95020584
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER
License Type: NP
Provider ID: 289902
Provider Gender: Male
License Number: NP95020584
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY PRACTICE

FATLAND, SARAH

License Type: DO

Provider ID: 289902

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

FATLAND, SARAH

License Type: DO

Provider ID: 289902

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

FATLAND, SARAH

License Type: DO

Provider ID: 289902

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

FATLAND, SARAH

License Type: DO

Provider ID: 289902

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommu*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

nityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

FATLAND, SARAH
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 289899
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 304701
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289899

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s) 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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 304701

Provider Gender: Male

License Number: A135564

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: A135564

NPI: 1699038125

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*

Cultural Competency: N

Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

KETCHEL, CLINT

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: A135564

NPI: 1699038125

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*

Cultural Competency: N

Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: A145924
NPI: 1477933026
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: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: A145924
NPI: 1477933026
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: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: A145924
NPI: 1477933026
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: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA

License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: A145924
NPI: 1477933026
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: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: A145924
NPI: 1477933026
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: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MCDANIEL, LISA
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: A145924
NPI: 1477933026
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: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MILLER, DIANA
License Type: DO
Provider ID: 289943
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

MILLER, DIANA
License Type: DO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 304702
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 517 N HORNE ST OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

MILLER, DIANA
License Type: DO
Provider ID: 289943
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 517 N HORNE ST OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

MILLER, DIANA
License Type: DO
Provider ID: 304702
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 517 N HORNE ST OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760)*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 289902
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 289902
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

NGUYEN, DANIELA
License Type: DO
Provider ID: 289902
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hospital Affiliation: TRI CITY MEDICAL CTR
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: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VIDAL, MONICA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A8949

NPI: 1871791749
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

VIDAL, MONICA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

VIDAL, MONICA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 9AM-4PM*

FAMILY PRACTICE

VIDAL, MONICA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4700 N RIVER RD
  OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

VIDAL, MONICA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FAMILY PRACTICE

VIDAL, MONICA
License Type: DO
Provider ID: 289902
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

FQHC

TRUECARE,
Provider ID: 289857
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

FQHC

TRUECARE,
Provider ID: 289857
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902
NPI: 1649662719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902
NPI: 1316501562
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 289902
NPI: 1649662719
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 289902
NPI: 1316501562
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM
TH 8AM-12PM
F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,
Provider ID: 289943
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,
Provider ID: 304702
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,
Provider ID: 289943
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,
Provider ID: 304702
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,
Provider ID: 289899
NPI: 1629357355
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,
Provider ID: 304701
NPI: 1629357355
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,
Provider ID: 289899
NPI: 1629357355
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,
Provider ID: 304701
NPI: 1629357355
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: C54458
NPI: 1942204979
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 289902
Provider Gender: Female
License Number: C54458
NPI: 1942204979
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: C54458
NPI: 1942204979
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: C54458
NPI: 1942204979
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

INTERNAL MEDICINE

HASSANI, FARZANEH
License Type: MD
Provider ID: 289902
Provider Gender: Female
License Number: C54458
NPI: 1942204979
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 303883
Provider Gender: Female
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 289857
Provider Gender: Female
License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 891-4667
After Hours Phone: (760) 891-4667
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 305294
Provider Gender: Female
License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 289857
Provider Gender: Female
License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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
Accessibility: CONTACT PROVIDER

PEDIATRICS

CALHOUN, CHANELLE
License Type: MD
Provider ID: 305294
Provider Gender: Female
License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 891-4667
After Hours Phone: (760) 891-4667
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 289857
Provider Gender: Male
License Number: A73814
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 305294
Provider Gender: Male
License Number: A73814
NPI: 1164434312

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 289857
Provider Gender: Male
License Number: A73814
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 305294
Provider Gender: Male
License Number: A73814
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

CURLEY, EDWARD
License Type: MD
Provider ID: 303869
Provider Gender: Male
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

DANIELS, SARAH
License Type: MD
Provider ID: 204869
Provider Gender: Female
NPI: 1730446527
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 130
OCEANSIDE, CA 92056
Phone: (760) 547-1010
After Hours Phone: (760) 547-1010
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA
License Type: MD
Provider ID: 289899
Provider Gender: Female
License Number: A109056
NPI: 1932304342
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GUNTA, SUJANA
License Type: MD
Provider ID: 304701
Provider Gender: Female
License Number: A109056
NPI: 1932304342
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRICS

GUNTA, SUJANA

License Type: MD

Provider ID: 289899

Provider Gender: Female

License Number: A109056

NPI: 1932304342

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 818 PIER VIEW WAY OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PEDIATRICS

GUNTA, SUJANA

License Type: MD

Provider ID: 304701

Provider Gender: Female

License Number: A109056

NPI: 1932304342

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 818 PIER VIEW WAY OCEANSIDE, CA 92054
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PEDIATRICS

KRAMER, MELISSA

License Type: MD

Provider ID: 278249

Provider Gender: Female

NPI: 1467833467

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

- 3605 VISTA WAY BLDG B OCEANSIDE, CA 92056
- *Phone: (760) 547-1010*

Fax: (760) 547-1011

- *After Hours Phone: (760) 547-1010*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-12PM*

PEDIATRICS

MAC, VICTOR

License Type: DO

Provider ID: 289857

Provider Gender: Male

License Number: 20A17766

NPI: 1790281236

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation:

COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

MAC, VICTOR
License Type: DO
Provider ID: 305294
Provider Gender: Male
License Number: 20A17766
NPI: 1790281236
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

MAC, VICTOR
License Type: DO
Provider ID: 289857
Provider Gender: Male
License Number: 20A17766
NPI: 1790281236
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

MAC, VICTOR
License Type: DO
Provider ID: 305294
Provider Gender: Male
License Number: 20A17766
NPI: 1790281236
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRICS

MACINTYRE, ELIZABETH

License Type: MD

Provider ID: 282327

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: CONTACT PROVIDER

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

PEDIATRICS

MCCAMMACK, BRADLEY

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (760) 631-5000
Fax: (760) 414-3731
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3731
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3731
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3731
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MILLER, DONALD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: MD
Provider ID: 204370
Provider Gender: Male
NPI: 1154356582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 130
OCEANSIDE, CA 92056
Phone: (760) 547-1010
After Hours Phone: (760) 547-1010
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

NOVOTA, GABRIELA
License Type: MD
Provider ID: 309792
Provider Gender: Female
NPI: 1154520096
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

PARK, RONALD
License Type: MD
Provider ID: 303868
Provider Gender: Male
NPI: 1881695914
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4:30PM

PEDIATRICS

PERKINS, RACHEL
License Type: MD
Provider ID: 206313
Provider Gender: Female
NPI: 1427398320
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 130
OCEANSIDE, CA 92056

Phone: (760) 547-1010

After Hours Phone: (760) 547-1010

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

RONAN, KEVIN

License Type: MD

Provider ID: 289902

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 289902
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

POWAY

FAMILY PRACTICE

KAUR, JATINDER

License Type: MD

Provider ID: 289883

Provider Gender: Female

License Number: A120771

NPI: 1912141391

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Punjabi, Urdu*

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

- *Phone: (858) 218-3000*
- *After Hours Phone: (858) 218-3000*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FAMILY PRACTICE

KAUR, JATINDER

License Type: MD

Provider ID: 289883

Provider Gender: Female

License Number: A120771

NPI: 1912141391

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Punjabi, Urdu*

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

- *Phone: (858) 218-3000*
- *After Hours Phone: (858) 218-3000*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 289883

NPI: 1023518768

- *Provider English Spoken: Y*

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

- *Phone: (858) 218-3000*

Fax: (360) 462-2742

- *After Hours Phone: (858) 218-3000*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 289883

NPI: 1023518768

- *Provider English Spoken: Y*

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

- *Phone: (858) 218-3000*

Fax: (360) 462-2742

- *After Hours Phone: (858) 218-3000*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PEDIATRICS

CURET, ZULMA

License Type: MD

Provider ID: 289883

Provider Gender: Female

License Number: A119661

NPI: 1841561107

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

After Hours Phone: (858) 218-3000

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

CURET, ZULMA

License Type: MD

Provider ID: 289883

Provider Gender: Female

License Number: A119661

NPI: 1841561107

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

After Hours Phone: (858) 218-3000

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

LINDBACK, SARAH

License Type: MD

Provider ID: 204859

Provider Gender: Female

NPI: 1427345487

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

15725 POMERADO RD STE 203
POWAY, CA 92064

Phone: (858) 673-3340

Fax: (858) 673-1075

After Hours Phone: (858) 673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

LOSTETTER, ADRIENNE

License Type: MD

Provider ID: 204611

Provider Gender: Female

NPI: 1881607984

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

MOREIRA, LUCILA
License Type: DO
Provider ID: 276093
Provider Gender: Female
NPI: 1104846567
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
15725 POMERADO RD STE 203
POWAY, CA 92064
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8AM-5PM

PEDIATRICS

MORTIMER, DORI
License Type: MD
Provider ID: 204396
Provider Gender: Female
NPI: 1417928417
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
15725 POMERADO RD STE 203
POWAY, CA 92064
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

RAMGREN, AILEEN
License Type: DO
Provider ID: 223702
Provider Gender: Female
NPI: 1356785505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

15725 POMERADO RD STE 203
POWAY, CA 92064

Phone: (858) 673-3340

After Hours Phone: (858) 673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

TAI, KUANGKAI

License Type: MD

Provider ID: 204807

Provider Gender: Male

NPI: 1396744066

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: CONTACT PROVIDER

Hours: M-F 8:30AM-5PM SA 8:30AM-12PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

License Type: PA

Provider ID: 289883

Provider Gender: Female

License Number: PA23310

NPI: 1649692369

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

After Hours Phone: (858) 218-3000

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

BALDWIN, DONNA

License Type: PA

Provider ID: 289883

Provider Gender: Female

License Number: PA23310

NPI: 1649692369

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

After Hours Phone: (858) 218-3000

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

RAMONA

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PRACTITIONER

DOAN, CHINH

License Type: NP

Provider ID: 289875

Provider Gender: Female

License Number: NP18874

NPI: 1083845069

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH

License Type: NP

Provider ID: 289875

Provider Gender: Female

License Number: NP18874

NPI: 1083845069

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

TRUECARE,

Provider ID: 289875

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

TRUECARE,

Provider ID: 289875

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

HO, LYSA

License Type: DO

Provider ID: 289875

Provider Gender: Female

License Number: 20A17507

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

INTERNAL MEDICINE

HO, LYSA
License Type: DO
Provider ID: 289875
Provider Gender: Female
License Number: 20A17507
NPI: 1821494337
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

INTERNAL MEDICINE

YUNG, DORIS
License Type: MD
Provider ID: 289875
Provider Gender: Female
License Number: A89893
NPI: 1730386863
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YUNG, DORIS
License Type: MD
Provider ID: 289875
Provider Gender: Female
License Number: A89893
NPI: 1730386863
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

License Type: PA

Provider ID: 289875

Provider Gender: Female

License Number: PA22669

NPI: 1386741072

Provider English Spoken: Y

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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

License Type: PA

Provider ID: 289875

Provider Gender: Female

License Number: PA22669

NPI: 1386741072

Provider English Spoken: Y

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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

License Type: PA

Provider ID: 289875

Provider Gender: Female

License Number: PA51494

NPI: 1447681150

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

License Type: PA

Provider ID: 289875

Provider Gender: Female

License Number: PA51494

NPI: 1447681150

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SAN DIEGO

CERTIFIED NURSE PRACTITIONER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

AQUINO, FELINO

License Type: NP

Provider ID: 112894

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

License Type: NP

Provider ID: 112894

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

License Type: NP

Provider ID: 203755

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO

License Type: NP

Provider ID: 203755

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

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

Cultural Competency: N

Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ARTS, SERENA
License Type: NPF
Provider ID: 289863
Provider Gender: Female
License Number: NP10769
NPI: 1801881552
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ARTS, SERENA
License Type: NPF
Provider ID: 289863
Provider Gender: Female
License Number: NP10769
NPI: 1801881552
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA
License Type: NPF
Provider ID: 25517
Provider Gender: Female
License Number: NP95024510
NPI: 1558058636
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA
License Type: NPF
Provider ID: 25517
Provider Gender: Female
License Number: NP95024510
NPI: 1558058636
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
License Type: NP
Provider ID: 78906
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER
License Type: NP
Provider ID: 78906
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BURNS, DELLA
License Type: NP
Provider ID: 289882
Provider Gender: Female
License Number: NP7413
NPI: 1871577023
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BURNS, DELLA
License Type: NP
Provider ID: 289882
Provider Gender: Female
License Number: NP7413
NPI: 1871577023
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CELESTIN-RAMSEY, AKANKE
License Type: NPF
Provider ID: 217520
Provider Gender: Female
License Number: NP8563
NPI: 1447450275
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4PM

CERTIFIED NURSE PRACTITIONER

CELESTIN-RAMSEY, AKANKE
License Type: NPF
Provider ID: 217520
Provider Gender: Female
License Number: NP8563
NPI: 1447450275
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4PM

CERTIFIED NURSE PRACTITIONER

CHASE, AVA
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95000602
NPI: 1164496386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHASE, AVA
License Type: NP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 25731
Provider Gender: Female
License Number: NP95000602
NPI: 1164496386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CORREA, ANN MARIE
License Type: NPF
Provider ID: 289869
Provider Gender: Female
License Number: NP95033117
NPI: 1083420814
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

CORREA, ANN MARIE
License Type: NPF
Provider ID: 289869
Provider Gender: Female
License Number: NP95033117
NPI: 1083420814
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

DAVIES-UPPAL, ALLISON
License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95026125
NPI: 1053002360
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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

CERTIFIED NURSE PRACTITIONER

DAVIES-UPPAL, ALLISON
License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95026125
NPI: 1053002360
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

DEMESSIE, RAHEL
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95027483
NPI: 1619749041
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

DEMESSIE, RAHEL
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95027483
NPI: 1619749041
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Spoken: Marathi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY 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: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

DHARKAR-SURBER, SAPNA
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765
Provider English Spoken: Y
Provider Language(s) Spoken: Marathi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No

LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

GALLEGOS, CYNTHIA
License Type: NPF
Provider ID: 25731
Provider Gender: Female
License Number: NP95016217
NPI: 1174105589
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GALLEGOS, CYNTHIA
License Type: NPF
Provider ID: 25731
Provider Gender: Female
License Number: NP95016217
NPI: 1174105589
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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
License Type: NP
Provider ID: 78906
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
License Type: NP
Provider ID: 78906
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GOLDFINGER, SARAH
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GOLDFINGER, SARAH
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA
License Type: NPF
Provider ID: 25517
Provider Gender: Female
License Number: NP23206
NPI: 1447577671
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA
License Type: NPF
Provider ID: 25517
Provider Gender: Female
License Number: NP23206
NPI: 1447577671
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

HA, THU
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU
License Type: NP
Provider ID: 289868
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Number: NP95010517
NPI: 1346443983
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

License Type: NP

Provider ID: 289868

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858) 279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL

License Type: NP

Provider ID: 289868

Provider Gender: Female

License Number: NP95025954

NPI: 1992461230

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL

License Type: NP

Provider ID: 289868

Provider Gender: Female

License Number: NP95025954

NPI: 1992461230

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL

License Type: NP

Provider ID: 289868

Provider Gender: Female

License Number: NP95025954

NPI: 1992461230

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HAROUSH, GAL

License Type: NP

Provider ID: 289868

Provider Gender: Female

License Number: NP95025954

NPI: 1992461230

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

License Type: NP

Provider ID: 46039

Provider Gender: Female

License Number: NP17008

NPI: 1659579134

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

License Type: NP

Provider ID: 46039

Provider Gender: Female

License Number: NP17008

NPI: 1659579134

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

HART, BECKY

License Type: NPF

Provider ID: 289863

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HART, BECKY
License Type: NPF
Provider ID: 289863
Provider Gender: Female
License Number: NP95025699
NPI: 1316626344
Provider English Spoken: Y
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HEFNER, ANNA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP5512
NPI: 1588913537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HEFNER, ANNA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP5512
NPI: 1588913537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN
License Type: NP
Provider ID: 25517

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: NP95020046
NPI: 1710632435
- *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.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-4:30PM*

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95020046
NPI: 1710632435
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-4:30PM*

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-4:30PM*

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsa*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOANG, CHI
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY
License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNN JOY

License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HORNEY, KRISTAN

License Type: NPF
Provider ID: 289863
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

HORNEY, KRISTAN

License Type: NPF
Provider ID: 289863
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

INSTONE, SUSAN

License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

INSTONE, SUSAN
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA
License Type: NP
Provider ID: 289882
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA
License Type: NP
Provider ID: 289882
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KEMP, KATHRINE
License Type: NP
Provider ID: 289863
Provider Gender: Female
License Number: NP95018497

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1316615313
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KEMP, KATHRINE
License Type: NP
Provider ID: 289863
Provider Gender: Female
License Number: NP95018497
NPI: 1316615313
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KHAN, MATTHEW
License Type: NP
Provider ID: 100648
Provider Gender: Male
License Number: NP17838
NPI: 1942456124
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KHAN, MATTHEW
License Type: NP
Provider ID: 100648
Provider Gender: Male
License Number: NP17838
NPI: 1942456124
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CERTIFIED NURSE PRACTITIONER

KI, TRISH

License Type: NP

Provider ID: 289872

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

- *Phone: (858) 810-8700*
- *After Hours Phone: (858) 810-8700*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

CERTIFIED NURSE PRACTITIONER

KI, TRISH

License Type: NP

Provider ID: 289872

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

- *Phone: (858) 810-8700*
- *After Hours Phone: (858) 810-8700*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

License Type: NPF

Provider ID: 298139

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

- *Provider English Spoken: Y*

Cultural Competency: N

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*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

LENNON, RYAN

License Type: NPF

Provider ID: 298139

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2355*
- *After Hours Phone: (619) 515-2355*
- *Website: www.fhcsd.org*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
License Type: NP
Provider ID: 25731
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MANZO, CORINA
License Type: NPF
Provider ID: 289869
Provider Gender: Female
License Number: NP95020369
NPI: 1669087326
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

MANZO, CORINA
License Type: NPF
Provider ID: 289869
Provider Gender: Female
License Number: NP95020369
NPI: 1669087326
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA
License Type: NP
Provider ID: 78906
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA

License Type: NP
Provider ID: 78906
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN

License Type: NP
Provider ID: 289856
Provider Gender: Female
License Number: NP22031
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN

License Type: NP
Provider ID: 289856
Provider Gender: Female
License Number: NP22031
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETEL MARIE

License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95002233
NPI: 1245652387
Provider English Spoken: Y
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.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETEL MARIE
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95002233
NPI: 1245652387
Provider English Spoken: Y
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.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 564-8765
After Hours Phone: (619) 564-8765
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 564-8765
After Hours Phone: (619) 564-8765
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA

License Type: NP

Provider ID: 25517

Provider Gender: Female

License Number: NP95020179

NPI: 1417699869

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA

License Type: NP

Provider ID: 25517

Provider Gender: Female

License Number: NP95020179

NPI: 1417699869

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

License Type: NP

Provider ID: 289881

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

License Type: NP

Provider ID: 289872

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA
License Type: NP
Provider ID: 289881
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE
License Type: NP
Provider ID: 289868

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Mandarin, Yue Chinese*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 25731
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 25731
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Amharic, Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 78906

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 78906

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 25731

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

License Type: NPF

Provider ID: 25731

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y

Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 78906
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
License Type: NPF
Provider ID: 78906
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
License Type: NP
Provider ID: 112894
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
License Type: NP
Provider ID: 25517
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
License Type: NP
Provider ID: 112894
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 78906
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

License Type: NP

Provider ID: 25732

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

License Type: NP

Provider ID: 25732

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

License Type: NP

Provider ID: 78906

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

License Type: NP

Provider ID: 25732

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

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

Cultural Competency: N

Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE
License Type: NP
Provider ID: 289863
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE
License Type: NP
Provider ID: 289863
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATEL, KELLY
License Type: NP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 25608
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: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATEL, KELLY
License Type: NP
Provider ID: 25608
Provider Gender: Female
License Number: NP95004735
NPI: 1033493747
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
License Type: NP
Provider ID: 289868
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
License Type: NP
Provider ID: 289868
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
License Type: NP
Provider ID: 289872
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
License Type: NP
Provider ID: 289872
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
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: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
License Type: NP
Provider ID: 289868
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PATIAG, DANIEL
License Type: NP
Provider ID: 289868
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE
License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95014964
NPI: 1215543426
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE
License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95014964
NPI: 1215543426
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY
License Type: NP
Provider ID: 289881
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
Provider English Spoken: Y
Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
Provider English Spoken: Y
Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
Provider English Spoken: Y
Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUINTO, CINDY
License Type: NP
Provider ID: 289881
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
Provider English Spoken: Y
Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

REID, EMILY
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

RILEY, JEREN
License Type: NP
Provider ID: 289869
Provider Gender: Male
License Number: NP95012588
NPI: 1932742376
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

RILEY, JEREN
License Type: NP
Provider ID: 289869
Provider Gender: Male
License Number: NP95012588
NPI: 1932742376
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

ROGERS, TANYA
License Type: NP
Provider ID: 100648
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ROGERS, TANYA
License Type: NP
Provider ID: 100648
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
License Type: NP
Provider ID: 289872

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: NP4668
NPI: 1285732586
- *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: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM*
  TU 8:30AM-9PM
  W-F 8:30AM-5:30PM
  SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-5PM*
  TU 8AM-8PM
  W-F 8AM-5PM
  SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 7011 LINDA VISTA RD
  SAN DIEGO, CA 92111
- *Phone: (858) 810-8700*
- *After Hours Phone: (858) 810-8700*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM*
  TU 8:30AM-9PM
  W-F 8:30AM-5:30PM
  SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 6973 LINDA VISTA RD

SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
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: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
License Type: NP
Provider ID: 289872
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
License Type: NP
Provider ID: 289868
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH
License Type: NP
Provider ID: 100421
Provider Gender: Female

License Number: NP7374
NPI: 1730567678
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH
License Type: NP
Provider ID: 100421
Provider Gender: Female
License Number: NP7374
NPI: 1730567678
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

SCOTT, KELLY
License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95015026
NPI: 1013420801
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

SCOTT, KELLY
License Type: NP
Provider ID: 289869
Provider Gender: Female
License Number: NP95015026
NPI: 1013420801
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian

Health Services: Y

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

License Type: NP

Provider ID: 25731

Provider Gender: Female

License Number: NP10906

NPI: 1295750339

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

License Type: NP

Provider ID: 25731

Provider Gender: Female

License Number: 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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

License Type: NP

Provider ID: 25731

Provider Gender: Female

License Number: NP10906

NPI: 1295750339

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

License Type: NP

Provider ID: 25731

Provider Gender: Female

License Number: 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: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP
Provider ID: 87122
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP
Provider ID: 25732
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP

Provider ID: 25732

Provider Gender: Female

License Number: NP95006792

NPI: 1730604414

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

License Type: NP

Provider ID: 87122

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP

Provider ID: 257948

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

License Type: NP

Provider ID: 257948

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP2286
NPI: 1598989261
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP2286
NPI: 1598989261
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA
License Type: NP
Provider ID: 25731
Provider Gender: Female
License Number: NP95015780
NPI: 1184224396
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA
License Type: NP
Provider ID: 25731
Provider Gender: Female

License Number: NP95015780
NPI: 1184224396
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA
License Type: NP
Provider ID: 87122
Provider Gender: Female
License Number: NP95010814
NPI: 1841758984
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA
License Type: NP
Provider ID: 87122
Provider Gender: Female
License Number: NP95010814
NPI: 1841758984
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 25608
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 25608

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

- *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: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 39198

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

- 3514 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 39198

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

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

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: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA

License Type: NP

Provider ID: 46039

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
- *Phone: (619) 255-9155*
- *After Hours Phone: (619) 255-9155*
- *Website: www.lamaestra.or*

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHNA
License Type: NP
Provider ID: 46039
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA
License Type: NP
Provider ID: 100421
Provider Gender: Female
License Number: NP95001899
NPI: 1245635564
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA
License Type: NP
Provider ID: 100421
Provider Gender: Female
License Number: NP95001899
NPI: 1245635564
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
License Type: CRNM
Provider ID: 25731
Provider Gender: Female
License Number: NM792
NPI: 1174553259
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA
License Type: CRNM
Provider ID: 25731
Provider Gender: Female
License Number: NM792
NPI: 1174553259
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSHTEIN, YANA
License Type: CRNM
Provider ID: 25608
Provider Gender: Female
License Number: NM1662
NPI: 1396956512
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSHTEIN, YANA
License Type: CRNM
Provider ID: 25608
Provider Gender: Female
License Number: NM1662
NPI: 1396956512
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

TOLMIE, SIMONE
License Type: CRNM
Provider ID: 25731
Provider Gender: Female

License Number: NM236263
NPI: 1104572007
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: Providence Santa Rosa Memorial Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

TOLMIE, SIMONE
License Type: CRNM
Provider ID: 25731
Provider Gender: Female
License Number: NM236263
NPI: 1104572007
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: Providence Santa Rosa Memorial Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK
License Type: DC
Provider ID: 217520
Provider Gender: Female
License Number: DC27523
NPI: 1295278281
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Turkish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK
License Type: DC
Provider ID: 217520
Provider Gender: Female
License Number: DC27523
NPI: 1295278281
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Turkish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

CABALLERO, JAMES

License Type: DC

Provider ID: 25517

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y

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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CHIROPRACTOR

CABALLERO, JAMES

License Type: DC

Provider ID: 112894

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y

Cultural Competency: N

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

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CHIROPRACTOR

CABALLERO, JAMES

License Type: DC

Provider ID: 112894

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CHIROPRACTOR

CABALLERO, JAMES

License Type: DC

Provider ID: 25517

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsa

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH
License Type: DC
Provider ID: 25517
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH
License Type: DC
Provider ID: 25517
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH
License Type: DC
Provider ID: 112894
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH
License Type: DC
Provider ID: 112894
Provider Gender: Male
License Number: DC15775

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1821463159
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
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
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

HALEY, STEVEN
License Type: DC
Provider ID: 46039
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

HALEY, STEVEN
License Type: DC
Provider ID: 46039
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

HOURIHAN, KEITH
License Type: DC
Provider ID: 46039
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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

CHIROPRACTOR

HOURIHAN, KEITH

License Type: DC
Provider ID: 46039
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

ILCHENA, ALESANDRA

License Type: DC
Provider ID: 46039
Provider Gender: Female
License Number: DC32800
NPI: 1871046664
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 798-3947
After Hours Phone: (619) 798-3947
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

ILCHENA, ALESANDRA

License Type: DC
Provider ID: 46039
Provider Gender: Female
License Number: DC32800
NPI: 1871046664
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 798-3947
After Hours Phone: (619) 798-3947
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHIROPRACTOR

KAZEM, AHMAD

License Type: DC
Provider ID: 37723
Provider Gender: Male
License Number: DC33300
NPI: 1003296096
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

KAZEM, AHMAD
License Type: DC
Provider ID: 37723
Provider Gender: Male
License Number: DC33300
NPI: 1003296096
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER
License Type: DC
Provider ID: 112894
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

CHIROPRACTOR

LOVERN, JENNIFER
License Type: DC
Provider ID: 112894
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

CHIROPRACTOR

OLSEN, MARTIN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: DC
Provider ID: 25608
Provider Gender: Male
License Number: DC20729
NPI: 1730247990
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OLSEN, MARTIN
License Type: DC
Provider ID: 25608
Provider Gender: Male
License Number: DC20729
NPI: 1730247990
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROJAS, RICHARD
License Type: DC
Provider ID: 100421
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROJAS, RICHARD
License Type: DC
Provider ID: 100421
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 100421
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
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: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 100421
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 78906
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID
License Type: DC
Provider ID: 78906
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
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: CONTACT PROVIDER

CHIROPRACTOR

TAGHIZADEH, MAJID

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: DC
Provider ID: 78906
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian, Turkish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

TAGHIZADEH, MAJID
License Type: DC
Provider ID: 100421
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian, Turkish*

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

CHIROPRACTOR

TAGHIZADEH, MAJID
License Type: DC
Provider ID: 78906
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian, Turkish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

TAGHIZADEH, MAJID
License Type: DC
Provider ID: 100421
Provider Gender: Male
License Number: DC30121
NPI: 1750590600
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian, Turkish*

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

CHIROPRACTOR

TRUONG, VENNES
License Type: DC
Provider ID: 25517
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CHIROPRACTOR

TRUONG, VENNES
License Type: DC
Provider ID: 25517
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 112894
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 112894
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.operationsa

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

DERMATOLOGY

BURROWS, WILLIAM
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DERMATOLOGY

BURROWS, WILLIAM
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A140912
NPI: 1033539184
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA
License Type: MD
Provider ID: 78906
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Number: A140912
NPI: 1033539184
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

AHMAD, AAKIF
License Type: DO
Provider ID: 25731
Provider Gender: Male
License Number: 20A12732
NPI: 1720308331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

AHMAD, AAKIF
License Type: DO
Provider ID: 25731
Provider Gender: Male
License Number: 20A12732
NPI: 1720308331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CHANG, AMY
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A93385
NPI: 1750568911
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CHANG, AMY
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A93385
NPI: 1750568911
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A113255
NPI: 1912051715
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A113255
NPI: 1912051715
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

ISLAM, JULIE
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A149552
NPI: 1750780516
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

LEVINE, MATTHEW
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A77126
NPI: 1801994231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

LEVINE, MATTHEW
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A77126
NPI: 1801994231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

LORENZO, PATRICIA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A129599
NPI: 1487913315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

LORENZO, PATRICIA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A129599
NPI: 1487913315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

MCCALLUM, JAMES
License Type: MD
Provider ID: 25731
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
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: CONTACT PROVIDER

Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM
F 8:30AM-5PM
SA 8:30AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

MCCALLUM, JAMES

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A55708

NPI: 1609838994

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM
F 8:30AM-5PM
SA 8:30AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A50477
NPI: 1922105964
Provider English Spoken: Y
Provider Language(s) Spoken: Modern Greek
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A50477
NPI: 1922105964
Provider English Spoken: Y
Provider Language(s) Spoken: Modern Greek
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
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: CONTACT PROVIDER
Hours: M-F 9AM-5PM

FAMILY PRACTICE

ABDALLAH, ALI

License Type: DO
Provider ID: 78906
Provider Gender: Male
License Number: 20A15471
NPI: 1649699968
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI
License Type: DO
Provider ID: 78906
Provider Gender: Male
License Number: 20A15471
NPI: 1649699968
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 37723
Provider Gender: Male
License Number: A157505
NPI: 1588197826
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 37723
Provider Gender: Male
License Number: A157505
NPI: 1588197826
- *Provider English Spoken: Y*
- *Provider Language(s) 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
- *Provider English Spoken: Y*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 100648
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: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
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: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
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: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA
License Type: MD
Provider ID: 100648
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pashto
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A183464
NPI: 1821677584
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A183464
NPI: 1821677584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BISHOP, MELISSA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: C137521
NPI: 1578667077
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BISHOP, MELISSA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: C137521
NPI: 1578667077
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

License Type: MD
Provider ID: 289856
Provider Gender: Female
License Number: A165398
NPI: 1730684200
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FAMILY PRACTICE

BODIFORD, SAMANTHA
License Type: MD
Provider ID: 289856
Provider Gender: Female
License Number: A165398
NPI: 1730684200
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

FAMILY PRACTICE

BRADY, PATRICIA
License Type: MD
Provider ID: 289863
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: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

FAMILY PRACTICE

BRADY, PATRICIA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: C53121
NPI: 1952390437
Provider English Spoken: Y
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

FAMILY PRACTICE

BRODSKY, MARK
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: C53623
NPI: 1346337904
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

BRODSKY, MARK
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: C53623
NPI: 1346337904
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A148499
NPI: 1013399559
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

BROWN, BRANDON
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A148499
NPI: 1013399559

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 25732
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 25732
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 25732
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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

FAMILY PRACTICE

BURTON, LUCAS
License Type: DO
Provider ID: 25732
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A157488
NPI: 1316479892
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4194
After Hours Phone: (619) 662-4194
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A157488
NPI: 1316479892
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4194
After Hours Phone: (619) 662-4194
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 37723
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 37723
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 25732
Provider Gender: Male
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: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 25732
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

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

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 25732
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: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 25732
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHUN, HYUN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A163978
NPI: 1083118988
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

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

FAMILY PRACTICE

CHUN, HYUN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A163978
NPI: 1083118988
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CLARK, DONIA
License Type: MD
Provider ID: 97440
Provider Gender: Female
License Number: A178849
NPI: 1689238560
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CLARK, DONIA
License Type: MD
Provider ID: 97440
Provider Gender: Female
License Number: A178849
NPI: 1689238560
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CORMAN, DANIEL
License Type: DO
Provider ID: 25608
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORMAN, DANIEL
License Type: DO
Provider ID: 25608
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DAPPEN, AMANDA
License Type: MD
Provider ID: 37723
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

DAPPEN, AMANDA
License Type: MD
Provider ID: 37723
Provider Gender: Female
License Number: A153414
NPI: 1689037111
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

DAVIS, DEIRDRE
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A165432
NPI: 1265921365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

FAMILY PRACTICE

DAVIS, DEIRDRE
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A165432
NPI: 1265921365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

FAMILY PRACTICE

FAMBRO, CYNTHIA
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A153223
NPI: 1710331707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA
License Type: MD
Provider ID: 217520
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: CONTACT PROVIDER

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 100421
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: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

FLORES, JOE
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

FAMILY PRACTICE

GIRGIS, CHERIF
License Type: MD
Provider ID: 312590
Provider Gender: Male
NPI: 1023237260
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL HOSPITAL
Board Certified: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM

FAMILY PRACTICE

GLEASON-ROHRER, GWEN
License Type: MD
Provider ID: 289882
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON-ROHRER, GWEN
License Type: MD
Provider ID: 289881
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON-ROHRER, GWEN
License Type: MD
Provider ID: 289882
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes

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

FAMILY PRACTICE

GLEASON-ROHRER, GWEN
License Type: MD
Provider ID: 289881
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GRIFFITHS, KENNETH
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: C52451
NPI: 1760563068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

GRIFFITHS, KENNETH
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: C52451
NPI: 1760563068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

GUTIERREZ, TANIA
License Type: DO
Provider ID: 100648
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA
License Type: DO
Provider ID: 100648
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 103499
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 78906
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 103499

Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
License Type: DO
Provider ID: 78906
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HENDRIX, JEFFERSON
License Type: MD
Provider ID: 307044
Provider Gender: Male
License Number: A32571
NPI: 1235142738
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HENDRIX, JEFFERSON
License Type: MD
Provider ID: 307044
Provider Gender: Male
License Number: A32571
NPI: 1235142738
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

JAINCHILL, AMANDA
License Type: MD
Provider ID: 25517

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

FAMILY PRACTICE

JAINCHILL, AMANDA
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A141541
NPI: 1720426901
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER
License Type: MD
Provider ID: 100648
Provider Gender: Female
License Number: G149974
NPI: 1407818768
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER
License Type: MD
Provider ID: 100648
Provider Gender: Female
License Number: G149974
NPI: 1407818768
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619)

515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A100391
NPI: 1124210844
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A100391
NPI: 1124210844
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN
License Type: MD
Provider ID: 37723
Provider Gender: Male
License Number: A112379
NPI: 1275793929
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

License Type: MD

Provider ID: 37723

Provider Gender: Male

License Number: A112379

NPI: 1275793929

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

Cultural Competency: N

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: CONTACT PROVIDER*

FAMILY PRACTICE

LACH, REBECCA

License Type: MD

Provider ID: 100421

Provider Gender: Female

License Number: A177922

NPI: 1679137780

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

- 4094 4TH AVE
  SAN DIEGO, CA 92103
- *Phone: (619) 515-2545*
- *After Hours Phone: (619) 515-2545*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-9PM F 8AM-5PM*

FAMILY PRACTICE

LACH, REBECCA

License Type: MD

Provider ID: 25732

Provider Gender: Female

License Number: A177922

NPI: 1679137780

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

- 3544 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LACH, REBECCA

License Type: MD

Provider ID: 25732

Provider Gender: Female

License Number: A177922

NPI: 1679137780

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

- 3544 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*

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

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LACH, REBECCA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEE, SANDRINE
License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LINDEMAN, KURTIS
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A104052
NPI: 1124155791
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

LINDEMAN, KURTIS
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A104052
NPI: 1124155791
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

LOUGH, MICHELLE
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A165872
NPI: 1053816496
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A165872
NPI: 1053816496
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LU, JULIE
License Type: DO

Provider ID: 103499
Provider Gender: Female
License Number: 20A14804
NPI: 1619210614
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 5160 FEDERAL BLVD
  SAN DIEGO, CA 92105
- *Phone: (619) 515-2454*
- *After Hours Phone: (619) 515-2454*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM*

FAMILY PRACTICE

LU, JULIE
License Type: DO
Provider ID: 103499
Provider Gender: Female
License Number: 20A14804
NPI: 1619210614
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
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: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5:30PM*

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A161682
NPI: 1841726148
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-7PM*
  TU-TH 8AM-6PM
  F 8AM-5:30PM
  SA 8AM-5PM

FAMILY PRACTICE

MANDOYAN, AUSTIN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A161682
NPI: 1841726148
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1809 NATIONAL AVE

SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 289868
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 289868
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE
License Type: DO
Provider ID: 289872
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

License Type: DO

Provider ID: 289868

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

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

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 6973 LINDA VISTA RD SAN DIEGO, CA 92111
- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

MARSTON, JACQUELINE

License Type: DO

Provider ID: 289868

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

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

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 6973 LINDA VISTA RD SAN DIEGO, CA 92111
- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

MARSTON, JACQUELINE

License Type: DO

Provider ID: 289872

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

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

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 7011 LINDA VISTA RD SAN DIEGO, CA 92111
- *Phone: (858) 810-8700*
- *After Hours Phone: (858) 810-8700*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

MATICH, BRANKO

License Type: MD

Provider ID: 289872

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)*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

810-8700
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 289868
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

MATICH, BRANKO
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MELGAR, MONICA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A154399
NPI: 1629432174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

MELGAR, MONICA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A154399
NPI: 1629432174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA

License Type: MD

Provider ID: 37723

Provider Gender: Female

License Number: A162332

NPI: 1063945657

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MORALES, ALEJANDRA

License Type: MD

Provider ID: 37723

Provider Gender: Female

License Number: A162332

NPI: 1063945657

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 307044

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA MARIA

License Type: MD

Provider ID: 307044

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

NGUYEN, NGOC
License Type: MD
Provider ID: 257948
Provider Gender: Male
License Number: A74094
NPI: 1184668105
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, NGOC
License Type: MD
Provider ID: 257948
Provider Gender: Male
License Number: A74094
NPI: 1184668105
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN-CLEARY, THAI
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A86079
NPI: 1467442624
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

NGUYEN-CLEARY, THAI
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A86079
NPI: 1467442624
Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

NIAZI, HARRIS
License Type: MD
Provider ID: 25731
Provider Gender: Male
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: CONTACT PROVIDER

FAMILY PRACTICE

NIAZI, HARRIS
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NORRIS, JEFFREY
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A136275
NPI: 1073870374
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

NORRIS, JEFFREY

License Type: MD

Provider ID: 289863

Provider Gender: Male

License Number: A136275

NPI: 1073870374

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

NUQUI, JOSIE

License Type: MD

Provider ID: 203755

Provider Gender: Female

License Number: A71544

NPI: 1184773673

Provider English Spoken: Y

Provider Language(s) 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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

NUQUI, JOSIE

License Type: MD

Provider ID: 203755

Provider Gender: Female

License Number: A71544

NPI: 1184773673

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

PERESS, LILIA

License Type: MD

Provider ID: 289868

Provider Gender: Female

License Number: A168066

NPI: 1275945446

Provider English Spoken: Y

Provider Language(s) Spoken: Ukrainian

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PERESS, LILIA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A168066
NPI: 1275945446
Provider English Spoken: Y
Provider Language(s) Spoken: Ukrainian
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PERESS, LILIA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A168066
NPI: 1275945446
Provider English Spoken: Y
Provider Language(s) Spoken: Ukrainian
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PERESS, LILIA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A168066
NPI: 1275945446
Provider English Spoken: Y
Provider Language(s) Spoken: Ukrainian
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PEREZ, PERLITA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A119689
NPI: 1174810972
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A119689
NPI: 1174810972
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PROPST, TOBE
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A82123
NPI: 1194814277
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PROPST, TOBE
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A82123
NPI: 1194814277
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

RAGUVEER, VISHAKA
License Type: MD
Provider ID: 112894
Provider Gender: Female
License Number: A172736
NPI: 1740609387
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (916) 419-7292
After Hours Phone: (916) 419-7292
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

FAMILY PRACTICE

RAGUVEER, VISHAKA
License Type: MD
Provider ID: 112894
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
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

FAMILY PRACTICE

RAGUVEER, VISHAKA
License Type: MD
Provider ID: 297039
Provider Gender: Female
NPI: 1740609387
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
COMMUNITY CARE IPA LLC
9995 CARMEL MOUNTAIN RD STE 10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844) 200-2426
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

RIDGE, NEAL
License Type: DO
Provider ID: 307044
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RIDGE, NEAL

License Type: DO

Provider ID: 307044

Provider Gender: Male

License Number: 20A6920

NPI: 1053381004

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RODRIGUEZ, SEAN

License Type: MD

Provider ID: 37723

Provider Gender: Male

License Number: A120576

NPI: 1780909903

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

RODRIGUEZ, SEAN

License Type: MD

Provider ID: 37723

Provider Gender: Male

License Number: A120576

NPI: 1780909903

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

License Type: DO

Provider ID: 46039

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 284-4731

After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

FAMILY PRACTICE

SCHUMAKER, EDWARD
License Type: DO
Provider ID: 46039
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
Fax: (619) 284-4731
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

FAMILY PRACTICE

SCOTT, RYLEE
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: A162946
NPI: 1457887911
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCOTT, RYLEE
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: A162946
NPI: 1457887911
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHEIKH, ZARA
License Type: MD
Provider ID: 289882
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

SHEIKH, ZARA
License Type: MD
Provider ID: 289881
Provider Gender: Female
License Number: A163512
NPI: 1952808727
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

SHEIKH, ZARA
License Type: MD
Provider ID: 289882
Provider Gender: Female
License Number: A163512
NPI: 1952808727
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

SHEIKH, ZARA
License Type: MD
Provider ID: 289881
Provider Gender: Female
License Number: A163512
NPI: 1952808727
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FAMILY PRACTICE

SHIRAKI, JEAN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: DO
Provider ID: 100648
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Japanese*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHIRAKI, JEAN
License Type: DO
Provider ID: 100648
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Japanese*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI
License Type: DO
Provider ID: 103499
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI
License Type: DO
Provider ID: 103499
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES

License Type: MD

Provider ID: 35571

Provider Gender: Male

License Number: A97036

NPI: 1245490358

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

2391 ISLAND AVE
SAN DIEGO, CA 92102

- *Phone: (619) 515-2435*
- *After Hours Phone: (619) 515-2435*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SMOOT, CHARLES

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A97036

NPI: 1245490358

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

FAMILY PRACTICE

SMOOT, CHARLES

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A97036

NPI: 1245490358

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

FAMILY PRACTICE

SMOOT, CHARLES

License Type: MD

Provider ID: 35571

Provider Gender: Male

License Number: A97036

NPI: 1245490358

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

Cultural Competency: N

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SNYDER, CHRISTOPHER

License Type: DO

Provider ID: 257948

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH 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: CONTACT PROVIDER

FAMILY PRACTICE

SNYDER, CHRISTOPHER

License Type: DO

Provider ID: 257948

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH 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: CONTACT PROVIDER

FAMILY PRACTICE

SOPHY, ELIZABETH

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: A157547

NPI: 1013441203

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

SOPHY, ELIZABETH

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: A157547

NPI: 1013441203

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

License Type: MD

Provider ID: 289856

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619) 429-3733

Website: www.ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

License Type: MD

Provider ID: 289856

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619) 429-3733

Website: www.ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SWARTZ, JOHN

License Type: MD

Provider ID: 289863

Provider Gender: Male
License Number: G72486
NPI: 1396754131
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- *Phone: (619) 233-8500*
- *After Hours Phone: (619) 233-8500*
- *Website: N/A*

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

FAMILY PRACTICE

SWARTZ, JOHN
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: G72486
NPI: 1396754131
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- *Phone: (619) 233-8500*
- *After Hours Phone: (619) 233-8500*
- *Website: N/A*

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

FAMILY PRACTICE

THAI, JUSTIN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A177462
NPI: 1093276198
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

FAMILY PRACTICE

THAI, JUSTIN
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A177462
NPI: 1093276198
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

THAI, JUSTIN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A177462
NPI: 1093276198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

THAI, JUSTIN
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A177462
NPI: 1093276198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

FAMILY PRACTICE

THOMAS, ZACHARY
License Type: MD
Provider ID: 100648
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: CONTACT PROVIDER

FAMILY PRACTICE

THOMAS, ZACHARY
License Type: MD
Provider ID: 100648
Provider Gender: Male
License Number: A145023
NPI: 1326453119
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, UYEN-THAO
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A76709
NPI: 1891720355
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 795-2756
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, TONNIA
License Type: DO
Provider ID: 289882
Provider Gender: Female
License Number: 20A7662
NPI: 1982746657
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, UYEN-THAO
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A76709
NPI: 1891720355
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 795-2756
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

License Type: DO
Provider ID: 289882
Provider Gender: Female
License Number: 20A7662
NPI: 1982746657
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A17836
NPI: 1760975833
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A17836
NPI: 1760975833
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TSUCHIYA, KIMIKO

License Type: DO
Provider ID: 71153
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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

TSUCHIYA, KIMIKO

License Type: DO

Provider ID: 71153

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FAMILY PRACTICE

VALENZUELA, TRICIA

License Type: MD

Provider ID: 78906

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VALENZUELA, TRICIA

License Type: MD

Provider ID: 78906

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WANG, REGINA

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: A109828

NPI: 1154554871

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

FAMILY PRACTICE

WANG, REGINA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A109828
NPI: 1154554871
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

FAMILY PRACTICE

WU, JENNIFER
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A54702
NPI: 1215953013
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

WU, JENNIFER
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A54702
NPI: 1215953013
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

ZAHLER, MARVIN
License Type: DO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 100421
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAHLER, MARVIN
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZINK, IRENE
License Type: MD
Provider ID: 37723
Provider Gender: Female
License Number: C54198
NPI: 1215959549
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

ZINK, IRENE
License Type: MD
Provider ID: 37723
Provider Gender: Female
License Number: C54198
NPI: 1215959549
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 78906

NPI: 1982747671

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 78906

NPI: 1982747671

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 71153

NPI: 1588901045

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 71153

NPI: 1588901045

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 100648
NPI: 1477953933
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
Fax: (619) 255-8002
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR IBARRA,
Provider ID: 100648
NPI: 1477953933
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
Fax: (619) 255-8002
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,
Provider ID: 57714
NPI: 1316419070
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101
Phone: (619) 515-2520
Fax: (619) 231-0431
After Hours Phone: (619) 515-2520
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,
Provider ID: 57714
NPI: 1316419070
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101
Phone: (619) 515-2520
Fax: (619) 231-0431
After Hours Phone: (619) 515-2520
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: 304989
NPI: 1336525906
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
2114 NATIONAL AVE
SAN DIEGO, CA 92113

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 515-2406
After Hours Phone: (619) 515-2406
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: 103499
NPI: 1336525906
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
Fax: (619) 794-2696
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: 304989
NPI: 1336525906
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
2114 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2406
After Hours Phone: (619) 515-2406
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: 103499
NPI: 1336525906
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
Fax: (619) 794-2696
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,
Provider ID: 97440
NPI: 1235521782
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
Fax: (619) 269-0053
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 97440

NPI: 1235521782

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113

Phone: (619) 515-2422

Fax: (619) 269-0053

After Hours Phone: (619) 515-2422

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 87122

NPI: 1356750376

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

Fax: (619) 501-5814

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 87122

NPI: 1356750376

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

Fax: (619) 501-5814

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 25608

NPI: 1386689701

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

Fax: (858) 488-1394

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

TH 9AM-6PM
F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,
Provider ID: 25608
NPI: 1386689701
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
Fax: (858) 488-1394
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SD HILLCREST,
Provider ID: 100421
NPI: 1629456900
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM
F 8AM-5PM

FQHC

FAMILY HLTH CTR SD HILLCREST,
Provider ID: 100421
NPI: 1629456900
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM
F 8AM-5PM

FQHC

KING CHAVEZ HEALTH CENTER,
Provider ID: 217520
NPI: 1538262092
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-12PM

FQHC

KING CHAVEZ HEALTH

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CENTER,
Provider ID: 217520
NPI: 1538262092
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

FQHC

LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT,
Provider ID: 315861
NPI: 1609849074
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
Fax: (619) 510-4649
After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT,
Provider ID: 315861
NPI: 1609849074
Provider English Spoken: Y
Cultural Competency: N
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
Fax: (619) 510-4649
After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 46039
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 46039
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: 289868
NPI: 1609905215
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: 289868
NPI: 1780665877
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: 289868
NPI: 1609905215
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,
Provider ID: 289868
NPI: 1780665877
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

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

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: 25731
NPI: 1447281936
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: 298139
NPI: 1447281936
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: 25731
NPI: 1447281936
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8AM-5PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: 298139
NPI: 1447281936
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: 289882
NPI: 1962483040

Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: 289881
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: 289882
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

MID-CITY COMMUNITY CLINIC,
Provider ID: 289881
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,
Provider ID: 289856
NPI: 1215246996
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,
Provider ID: 289856
NPI: 1215246996
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: 25732
NPI: 1184169963
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: 39198
NPI: 1700821303
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: 25732
NPI: 1700821303
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 25732

NPI: 1184169963

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 39198

NPI: 1700821303

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 683-7586

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-5PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 25732

NPI: 1700821303

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 203755

NPI: 1861933897

Provider English Spoken: Y

Cultural Competency: N

OPERATION SAMAHAN

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

Fax: (858) 536-8034

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 25517

NPI: 1871680397

Provider English Spoken: Y

Cultural Competency: N

OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: 203755
NPI: 1861933897
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 112894
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: 25517
NPI: 1871680397
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 112894
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,
Provider ID: 289869
NPI: 1003902917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,
Provider ID: 289869
NPI: 1003902917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Indian Health Services: Indian Health Services: Y

FQHC

SAN DIEGO FAMILY CARE,
Provider ID: 289872
NPI: 1457724858
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FQHC

SAN DIEGO FAMILY CARE,
Provider ID: 289872
NPI: 1457724858
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 37723
NPI: 1326225632
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 232-5922
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 37723
NPI: 1326225632
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 232-5922
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
Provider ID: 257948
NPI: 1205477841
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
Provider ID: 257948
NPI: 1205477841
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: 307044

NPI: 1124782685

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: 307044

NPI: 1124782685

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 35571

NPI: 1174549232

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

Fax: (619) 515-2435

After Hours Phone: (619) 515-2435

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 35571

NPI: 1174549232

Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

Fax: (619) 515-2435

After Hours Phone: (619) 515-2435

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 289863

NPI: 1659415131

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,
Provider ID: 289863
NPI: 1659415131
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

GASTROENTEROLOGY

HAI, FAIZI
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A159324
NPI: 1639523228
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

GASTROENTEROLOGY

HAI, FAIZI
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A159324
NPI: 1639523228
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

GASTROENTEROLOGY

OLIVER, DEANNA
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A139921
NPI: 1750725362
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, ST AGNES MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, ADVENTIST MEDICAL CENTER, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

GASTROENTEROLOGY

OLIVER, DEANNA
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A139921
NPI: 1750725362
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, ST AGNES MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, ADVENTIST MEDICAL CENTER, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

GASTROENTEROLOGY

STIPHO, SALLY
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A104647
NPI: 1467642215
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

GASTROENTEROLOGY

STIPHO, SALLY

License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A104647
NPI: 1467642215
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

License Type: MD
Provider ID: 289881
Provider Gender: Female
License Number: A152267
NPI: 1730570144
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

License Type: MD
Provider ID: 289881
Provider Gender: Female
License Number: A152267
NPI: 1730570144
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HEPATOLOGY

GISH, ROBERT

License Type: MD
Provider ID: 315861
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 46039
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 46039
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HEPATOLOGY

GISH, ROBERT
License Type: MD
Provider ID: 315861
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HEPATOLOGY

HASSANEIN, TAREK
License Type: MD
Provider ID: 25517
Provider Gender: Male
License Number: A54452
NPI: 1801854450
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital,

CHILDRENS HOSPITAL AT MISSION, SHARP MEMORIAL HOSPITAL, Sharp Coronado Hospital Dept of Radiology, SCRIPPS MERCY HOSPITAL, ORANGE COAST MEM MED CTR, ORANGE COAST MEM MED CTR, JOHN C FREMONT HOSPITAL, SADDLEBACK MEMORIAL MED CTR, PALOMAR MEDICAL CENTER
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

HEPATOLOGY

HASSANEIN, TAREK
License Type: MD
Provider ID: 25517
Provider Gender: Male
License Number: A54452
NPI: 1801854450
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, CHILDRENS HOSPITAL AT MISSION, SHARP MEMORIAL HOSPITAL, Sharp Coronado Hospital Dept of Radiology, SCRIPPS MERCY HOSPITAL, ORANGE COAST MEM MED CTR, ORANGE COAST MEM MED CTR, JOHN C FREMONT HOSPITAL, SADDLEBACK MEMORIAL MED CTR, PALOMAR MEDICAL CENTER
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 97440
Provider Gender: Female
License Number: A122238
NPI: 1982044483
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY

License Type: MD
Provider ID: 25731
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: CONTACT PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A122238
NPI: 1982044483
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY
License Type: MD
Provider ID: 97440
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: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: A101017
NPI: 1073650339
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

License Type: MD

Provider ID: 217520

Provider Gender: Female

License Number: A101017

NPI: 1073650339

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ARGOUD, GEORGES

License Type: MD

Provider ID: 315861

Provider Gender: Male

License Number: G61898

NPI: 1144303538

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR

Board Certified: No

LA MAESTRA FAMILY CLINIC

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ARGOUD, GEORGES

License Type: MD

Provider ID: 315861

Provider Gender: Male

License Number: G61898

NPI: 1144303538

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR

Board Certified: No

LA MAESTRA FAMILY CLINIC

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

BALL, SHELDON

License Type: MD

Provider ID: 289868

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: CONTACT PROVIDER

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

INTERNAL MEDICINE

BALL, SHELDON

License Type: MD

Provider ID: 289868

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: CONTACT PROVIDER

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

INTERNAL MEDICINE

BALL, SHELDON

License Type: MD

Provider ID: 289868

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: CONTACT PROVIDER

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

INTERNAL MEDICINE

BALL, SHELDON

License Type: MD

Provider ID: 289868

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

INTERNAL MEDICINE

BENITEZ, MARTHA

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

License Type: DO
Provider ID: 25732
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

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

INTERNAL MEDICINE

BRIONES-COLMAN, FELICIA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A80153
NPI: 1962517367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

BRIONES-COLMAN, FELICIA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A80153
NPI: 1962517367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHAN, ANDY
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHAN, ANDY
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A122474
NPI: 1720350465
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A122474
NPI: 1720350465
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

CHEN, JAMES
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A86644
NPI: 1265495691
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CHEN, JAMES
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A86644
NPI: 1265495691
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CSAPOCZI, PETER
License Type: MD
Provider ID: 217520
Provider Gender: Male
License Number: A96919
NPI: 1841357118
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

INTERNAL MEDICINE

CSAPOCZI, PETER
License Type: MD
Provider ID: 217520
Provider Gender: Male
License Number: A96919
NPI: 1841357118
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM

INTERNAL MEDICINE

CUMMINS, ANDREW
License Type: MD
Provider ID: 100421
Provider Gender: Male

License Number: A102764
NPI: 1699917096
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CUMMINS, ANDREW
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A102764
NPI: 1699917096
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G80316
NPI: 1306808464
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G80316
NPI: 1306808464
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DIEP, KEVIN
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DIEP, KEVIN
License Type: DO
Provider ID: 100421
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

DODGE, JOHN
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G67831
NPI: 1770510489
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DODGE, JOHN

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: G67831

NPI: 1770510489

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

EL-GHONEIMY, AHMED

License Type: MD

Provider ID: 315861

Provider Gender: Male

License Number: A93235

NPI: 1942257852

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, NOVATO COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

LA MAESTRA FAMILY CLINIC

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

EL-GHONEIMY, AHMED

License Type: MD

Provider ID: 315861

Provider Gender: Male

License Number: A93235

NPI: 1942257852

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, NOVATO COMMUNITY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

LA MAESTRA FAMILY CLINIC

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FABELLA, GABRIEL
License Type: MD
Provider ID: 121666
Provider Gender: Male
NPI: 1124060827
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Japanese, Spanish, Tagalog*

Cultural Competency: N
Board Certified: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126
Phone: (858) 695-1262
Fax: (858) 695-2132
After Hours Phone: (858) 695-1262
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-3PM

INTERNAL MEDICINE

FRENETTE, CATHERINE
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A80461
NPI: 1417935081
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

FRENETTE, CATHERINE
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A80461
NPI: 1417935081
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

GEHR, MARC
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G67338
NPI: 1306800180
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

INTERNAL MEDICINE

GEHR, MARC
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G67338
NPI: 1306800180
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GERWER, JOHANNA
License Type: MD
Provider ID: 25731
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: CONTACT PROVIDER

INTERNAL MEDICINE

GERWER, JOHANNA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A169752
NPI: 1043742588
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

GUTIERREZ DAVILA, ANGELICA
License Type: MD
Provider ID: 289882
Provider Gender: Female
License Number: A175116

NPI: 1982180329
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

INTERNAL MEDICINE

GUTIERREZ DAVILA, ANGELICA
License Type: MD
Provider ID: 289882
Provider Gender: Female
License Number: A175116
NPI: 1982180329
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

INTERNAL MEDICINE

HAN, PAUL
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A116816
NPI: 1053553339
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAN, PAUL
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A116816
NPI: 1053553339
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAZELBAKER, PAUL
License Type: DO
Provider ID: 71153
Provider Gender: Male
License Number: 20A7147
NPI: 1831106103
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

HAZELBAKER, PAUL
License Type: DO
Provider ID: 71153
Provider Gender: Male
License Number: 20A7147
NPI: 1831106103
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

HENDERSON, PHILIP
License Type: MD
Provider ID: 100421
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: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HENDERSON, PHILIP
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A140324
NPI: 1447678834
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A74420
NPI: 1114955879
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

HIGGINSON, MICHELLE
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A74420
NPI: 1114955879
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

JACKSON, GAVIN
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: A110647
NPI: 1609033182
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

INTERNAL MEDICINE

JACKSON, GAVIN
License Type: MD
Provider ID: 100421

Provider Gender: Male
License Number: A110647
NPI: 1609033182
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

INTERNAL MEDICINE

JAMISON, KAREN
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A95356
NPI: 1285830505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

JAMISON, KAREN
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A95356
NPI: 1285830505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

KARCHES, KELLI
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A80931
NPI: 1891997631
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

KARCHES, KELLI
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A80931
NPI: 1891997631
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

KHANNA, POORNIMA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A70714
NPI: 1598862583
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

KHANNA, POORNIMA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A70714
NPI: 1598862583
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

KRIJGER, LISA

License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A67762
NPI: 1932278710
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A67762
NPI: 1932278710
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A140646
NPI: 1265874010
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 25732
Provider Gender: Female
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: CONTACT PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A140646
NPI: 1265874010
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA
License Type: MD
Provider ID: 25732
Provider Gender: Female
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: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 217520
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 217520
Provider Gender: Female
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: CONTACT PROVIDER

INTERNAL MEDICINE

MCFARLAND, NATHAN

License Type: MD

Provider ID: 289863

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: CONTACT PROVIDER

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

INTERNAL MEDICINE

MCFARLAND, NATHAN

License Type: MD

Provider ID: 289863

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: CONTACT PROVIDER

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

INTERNAL MEDICINE

NARANJO, RODRIGO

License Type: MD

Provider ID: 289868

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858) 279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

License Type: MD

Provider ID: 289868

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Spanish

Cultural Competency: N

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A113448
NPI: 1508170697
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A113448
NPI: 1508170697
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
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: CONTACT PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND
License Type: DO
Provider ID: 78906
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND

License Type: DO

Provider ID: 78906

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

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

Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

RAMERS, CHRISTIAN

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: A119631

NPI: 1730381385

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

- *Phone: (619) 515-2545*
- *After Hours Phone: (619) 515-2545*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

RAMERS, CHRISTIAN

License Type: MD

Provider ID: 100421

Provider Gender: Male

License Number: A119631

NPI: 1730381385

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

- *Phone: (619) 515-2545*
- *After Hours Phone: (619) 515-2545*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

RESNIKOFF, PAMELA

License Type: MD

Provider ID: 100421

Provider Gender: Female

License Number: G80358

NPI: 1841252533

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: G80358
NPI: 1841252533
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A126958
NPI: 1336346972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A126958
NPI: 1336346972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 46039

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER*
- *Hours: M-F 8AM-6PM SA 8AM-2PM*

INTERNAL MEDICINE

ROUEL, WADI
License Type: MD
Provider ID: 46039

Provider Gender: Male
License Number: C55979
NPI: 1740254713
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
- *Phone: (619) 255-9155*
- *After Hours Phone: (619) 255-9155*
- *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-6PM SA 8AM-2PM*

INTERNAL MEDICINE

SASSIC, JESSICA
License Type: MD
Provider ID: 100421

Provider Gender: Female
License Number: A185024
NPI: 1598342529
- *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: CONTACT PROVIDER*
- *Hours: M-TH 8AM-9PM F 8AM-5PM*

INTERNAL MEDICINE

SASSIC, JESSICA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A185024
NPI: 1598342529
- *Provider English Spoken: Y*

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH
License Type: MD
Provider ID: 307044
Provider Gender: Male
License Number: A81206
NPI: 1750498119
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH
License Type: MD
Provider ID: 307044
Provider Gender: Male
License Number: A81206
NPI: 1750498119
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SHI, RUJING
License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

SHI, RUJING

License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

TESSIER, ADLA

License Type: MD
Provider ID: 315861
Provider Gender: Female
License Number: A51666
NPI: 1013915594
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

TESSIER, ADLA

License Type: MD
Provider ID: 315861
Provider Gender: Female
License Number: A51666
NPI: 1013915594
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: C55724
NPI: 1689010324
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: C55724
NPI: 1689010324
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A156854
NPI: 1629480272
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, ADVENTIST HEALTH SIERRA VISTA, PARADISE VALLEY HOSPITAL
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A156854
NPI: 1629480272
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, ADVENTIST HEALTH SIERRA VISTA, PARADISE VALLEY HOSPITAL
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A169207
NPI: 1346628310
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA
License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A169207
NPI: 1346628310
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WASTILA, LISA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WASTILA, LISA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 289868
Provider Gender: Male
License Number: C186338
NPI: 1295738516
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Thai*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTS, ELI
License Type: MD
Provider ID: 217520
Provider Gender: Male
License Number: A79383
NPI: 1649373739
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WATTS, ELI
License Type: MD
Provider ID: 217520
Provider Gender: Male
License Number: A79383
NPI: 1649373739
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YUNG, STEVEN
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G80798
NPI: 1689636656
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERNAL MEDICINE

YUNG, STEVEN
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G80798
NPI: 1689636656
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
License Type: DO
Provider ID: 78906
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, 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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
License Type: DO
Provider ID: 78906
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS

MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, 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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,
Provider ID: 205571
NPI: 1508968751
Provider English Spoken: Y
Cultural Competency: N
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 25\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,
Provider ID: 87130
NPI: 1578672184
Provider English Spoken: Y
Cultural Competency: N
UCSD MEDICAL GROUP
330 LEWIS ST STE 400
SAN DIEGO, CA 92103
Phone: (619) 471-9260
Fax: (619) 471-9310
After Hours Phone: (619) 471-9260
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\25
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO
License Type: MD
Provider ID: 46039
Provider Gender: Male
License Number: A41375
NPI: 1447389101
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

NEUROLOGY

CANTU-REYNA, GUILLERMO
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 46039
Provider Gender: Male
License Number: A41375
NPI: 1447389101
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
LA MAESTRA FAMILY CLINIC
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
- *Phone: (619) 255-9155*
- *After Hours Phone: (619) 255-9155*
- *Website: www.lamaestra.org*

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

NEUROLOGY

GIRGIS, CHERIF
License Type: MD
Provider ID: 25517
Provider Gender: Male
License Number: A105162
NPI: 1023237260
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, French, Spanish*

Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL HOSPITAL
Board Certified: No
OPERATION SAMAHAN
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-4:30PM*

NEUROLOGY

GIRGIS, CHERIF
License Type: MD
Provider ID: 25517
Provider Gender: Male
License Number: A105162
NPI: 1023237260
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, French, Spanish*

Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, FRESNO HEART AND SURGICAL HOSPITAL
Board Certified: No
OPERATION SAMAHAN
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- *Phone: (844) 200-2426*
- *After Hours Phone: (844) 200-2426*
- *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-4:30PM*

NEUROLOGY

LUHAR, RIYA
License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A19975
NPI: 1235665662
- *Provider English Spoken: Y*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

NEUROLOGY

LUHAR, RIYA
License Type: DO
Provider ID: 100421
Provider Gender: Female
License Number: 20A19975
NPI: 1235665662
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

NEUROLOGY

MARTIN, FREDERIC
License Type: MD
Provider ID: 100421
Provider Gender: Male
License Number: G61965
NPI: 1265582605
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEUROLOGY

MARTIN, FREDERIC
License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 100421
Provider Gender: Male
License Number: G61965
NPI: 1265582605
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEUROLOGY

TAFRESHI, GILDA

License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A103111
NPI: 1891946950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

NEUROLOGY

TAFRESHI, GILDA

License Type: MD
Provider ID: 100421
Provider Gender: Female
License Number: A103111
NPI: 1891946950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER

License Type: MD
Provider ID: 46039

Provider Gender: Female
License Number: A172929
NPI: 1679008569
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A172929
NPI: 1679008569
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD

SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY
License Type: MD
Provider ID: 289868
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP 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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A113001

NPI: 1225231582

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 25608

Provider Gender: Male

License Number: A113001

NPI: 1225231582

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109

- *Phone: (619) 515-2444*
- *After Hours Phone: (619) 515-2444*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 8:30AM-5PM TH 9:30AM-6PM*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 78906

Provider Gender: Male

License Number: A113001

NPI: 1225231582

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 39198
Provider Gender: Male
License Number: A113001
NPI: 1225231582
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: A113001
NPI: 1225231582
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: A113001
NPI: 1225231582
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: A113001
NPI: 1225231582
- *Provider English Spoken: Y*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
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: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM TH 9:30AM-6PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A163464
NPI: 1326531401
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 3705 MISSION BLVD
  SAN DIEGO, CA 92109
- *Phone: (619) 515-2444*
- *After Hours Phone: (619) 515-2444*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A163464
NPI: 1326531401
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A163464
NPI: 1326531401
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 4725 MARKET ST
  SAN DIEGO, CA 92102
- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: A108228
NPI: 1629277322
- *Provider English Spoken: Y*

Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A108228
NPI: 1629277322
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A108228
NPI: 1629277322
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A108228
NPI: 1629277322
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 39198
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 39198
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 4725 MARKET ST
  SAN DIEGO, CA 92102
- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 3705 MISSION BLVD
  SAN DIEGO, CA 92109
- *Phone: (619) 515-2444*
- *After Hours Phone: (619) 515-2444*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: C159737
NPI: 1326243833
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP 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: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: C159737
NPI: 1326243833
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP 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: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp 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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 78906

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM TH 9:30AM-6PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25732
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL,

GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL,

GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM TH 9:30AM-6PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A161105
NPI: 1134515695
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: A161105
NPI: 1134515695
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A164859

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER*
- *Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-5PM*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A164859
NPI: 1952751711
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
- *Phone: (619) 515-2560*

After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 78906
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 78906
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 39198
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: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 25608
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 25731
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 39198
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 25608
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: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

License Type: DO

Provider ID: 25731

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

License Type: DO

Provider ID: 217520

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

License Type: DO

Provider ID: 217520

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s) 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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

License Type: MD

Provider ID: 25732

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 78906
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25732
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 78906
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25608
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OPHTHALMOLOGY

NAJAFI, DAVID
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A68124
NPI: 1396715991
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM
F 8:30AM-5PM
SA 8:30AM-5PM

OPHTHALMOLOGY

NAJAFI, DAVID
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A68124
NPI: 1396715991
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-6PM
TH 8:30AM-6PM
F 8:30AM-5PM
SA 8:30AM-5PM

OPHTHALMOLOGY

SHAW, BLAKE
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7:30PM
TU-F 8:30AM-5:30PM

OPHTHALMOLOGY

SHAW, BLAKE
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7:30PM TU-F 8:30AM-5:30PM

OPHTHALMOLOGY

SHAW, BLAKE
License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SHAW, BLAKE
License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

ZABLIT, KARIM
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A42127
NPI: 1083700538
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:45PM

OPHTHALMOLOGY

ZABLIT, KARIM
License Type: MD
Provider ID: 289863
Provider Gender: Male
License Number: A42127
NPI: 1083700538
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Spoken: French
Cultural Competency: N
Hospital Affiliation: 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: CONTACT PROVIDER
Hours: M-F 8AM-4:45PM

OTOLARYNGOLOGY

MILLS, MORGAN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A181809
NPI: 1891359154
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

MILLS, MORGAN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A181809
NPI: 1891359154
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A186426
NPI: 1275152662
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A186426

NPI: 1275152662
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ABELL, GEOFFREY
License Type: MD
Provider ID: 204570
Provider Gender: Male
NPI: 1245256130
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

ABRAMSON, RACHEL
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A104918
NPI: 1588707178
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

ABRAMSON, RACHEL
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A104918
NPI: 1588707178
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619) 280-4213

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

ADJAN, ROULA

License Type: MD

Provider ID: 46039

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

License Type: MD

Provider ID: 46039

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

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

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ADLOUNI, LOUBABA

License Type: MD

Provider ID: 204574

Provider Gender: Female

NPI: 1669443685

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858) 924-1960

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A179851
NPI: 1740843499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS
License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: A179851
NPI: 1740843499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ALBINO, NICHOLAS
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A179851
NPI: 1740843499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

PEDIATRICS

ALBINO, NICHOLAS
License Type: MD
Provider ID: 78906
Provider Gender: Male
License Number: A179851
NPI: 1740843499
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

ANDREE, GREGOR
License Type: MD
Provider ID: 289881
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ANDREE, GREGOR
License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM

PEDIATRICS

ANDREE, GREGOR
License Type: MD
Provider ID: 289881
Provider Gender: Male
License Number: A72833
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ANDREE, GREGOR

License Type: MD

Provider ID: 289872

Provider Gender: Male

License Number: A72833

NPI: 1467436063

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

- *Phone: (858) 810-8700*
- *After Hours Phone: (858) 810-8700*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM*
  TU 8:30AM-9PM
  W-F 8:30AM-5:30PM
  SA 9AM-4PM

PEDIATRICS

ARCHAMBAULT, CHRISTIAN

License Type: MD

Provider ID: 204446

Provider Gender: Male

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) 924-1960*
- *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

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

PEDIATRICS

AWDYKOVYCH, MARTA

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A44027

NPI: 1447265137

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian*

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AWDYKOVYCH, MARTA

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

AYSON, NICOLE

License Type: MD

Provider ID: 87122

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

AYSON, NICOLE

License Type: MD

Provider ID: 87122

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

AZIMI, AYSUN

License Type: DO

Provider ID: 205178

Provider Gender: Female

NPI: 1710246160

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND

NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CLOVIS COMMUNITY HOSPITAL, CLOVIS COMMUNITY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CABARLO, JEHRIB
License Type: DO
Provider ID: 25731
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB
License Type: DO
Provider ID: 25731
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CASTELNOVI, CLAUDIA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A111170
NPI: 1417279324
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No

LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CASTELNOVI, CLAUDIA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A111170
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: CONTACT PROVIDER

PEDIATRICS

CHEN, EILEEN
License Type: MD
Provider ID: 296844
Provider Gender: Female
NPI: 1932660966
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CHEN, JENNIFER
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A141057
NPI: 1255785150
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CHEN, JENNIFER
License Type: MD
Provider ID: 78906

Provider Gender: Female
License Number: A141057
NPI: 1255785150
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9154
After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

CONE, STEPHANIE
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9154
After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

CORDES, WILLIAM
License Type: DO
Provider ID: 25731
Provider Gender: Male
License Number: 20A15743
NPI: 1174942544
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

PEDIATRICS

CORDES, WILLIAM

License Type: DO

Provider ID: 25731

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

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: CONTACT PROVIDER

Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

PEDIATRICS

DIXON, SARAH

License Type: MD

Provider ID: 289872

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

DIXON, SARAH

License Type: MD

Provider ID: 289872

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

FISHMAN, ELENA

License Type: MD

Provider ID: 276247

Provider Gender: Female

NPI: 1740249432

Provider English Spoken: Y

Provider Language(s) Spoken: Russian

Cultural Competency: N

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

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

FORTUNE, ERIN

License Type: MD

Provider ID: 39198

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

FORTUNE, ERIN

License Type: MD

Provider ID: 25731

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

PEDIATRICS

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FORTUNE, ERIN
License Type: MD
Provider ID: 25731
Provider Gender: Male
License Number: A95577
NPI: 1801088422
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

FORTUNE, ERIN
License Type: MD
Provider ID: 39198
Provider Gender: Male
License Number: A95577
NPI: 1801088422
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

FRIEDMAN, JAIME
License Type: MD
Provider ID: 204676
Provider Gender: Female
NPI: 1144297961
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GOGGIN, SAMANTHA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A163693
NPI: 1023506367
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9154

After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GOGGIN, SAMANTHA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A163693
NPI: 1023506367
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9154
After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

GRAY, SARAH
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A151631
NPI: 1508210311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7PM
TU-TH 8:30AM-6PM
F 8:30AM-5:30PM
SA 8:30AM-5PM

PEDIATRICS

GRAY, SARAH
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A151631
NPI: 1508210311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7PM
TU-TH 8:30AM-6PM
F 8:30AM-5:30PM
SA 8:30AM-5PM

PEDIATRICS

GUPTA, VARSHA
License Type: MD

Provider ID: 25731
Provider Gender: Female
License Number: A164889
NPI: 1891283214
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

GUPTA, VARSHA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A164889
NPI: 1891283214
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

HENDERSON, TREVOR
License Type: MD
Provider ID: 204586
Provider Gender: Male
NPI: 1356449425
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

HIBBS, NICOLE
License Type: MD
Provider ID: 204509
Provider Gender: Female
NPI: 1164627832
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8:30PM F 8AM-5PM SA 8AM-2PM

PEDIATRICS

HORMOZDYARAN, SANAYA
License Type: MD
Provider ID: 296313
Provider Gender: Female
NPI: 1750887634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
2790 TRUXTUN RD STE 120A
SAN DIEGO, CA 92106
Phone: (619) 222-1253
Fax: (619) 222-1276
After Hours Phone: (619) 222-1253
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JORDAN, JAMIE
License Type: MD
Provider ID: 204510
Provider Gender: Female
NPI: 1275762833
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

JUAREZ, PATRICIA
License Type: MD
Provider ID: 204696
Provider Gender: Female
NPI: 1205807229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

KARMAKAR, KANKA
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: C54941
NPI: 1972536654
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PEDIATRICS

KARMAKAR, KANKA
License Type: MD
Provider ID: 25517
Provider Gender: Female
License Number: C54941
NPI: 1972536654
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PEDIATRICS

KESANAPALLI, DEEPTHI
License Type: MD
Provider ID: 294427
Provider Gender: Female
NPI: 1487948584
Provider English Spoken: Y
Provider Language(s) Spoken: Telugu
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 335

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92123
Phone: (858) 576-8010
Fax: (858) 576-7391
After Hours Phone: (858) 576-8010
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-6PM F 8:30AM-12PM

PEDIATRICS

LAWRIE, ALISA
License Type: MD
Provider ID: 305240
Provider Gender: Female
NPI: 1407847908
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
Phone: (619) 297-4567
After Hours Phone: (619) 297-4567
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM F 8AM-5PM

PEDIATRICS

LE, NGUYEN
License Type: MD
Provider ID: 204363
Provider Gender: Male
NPI: 1548308109
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5507 EL CAJON BLVD STE B
SAN DIEGO, CA 92115
Phone: (619) 582-8814
Fax: (619) 582-8813
After Hours Phone: (619) 582-8814
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

LOPER, KAREN
License Type: MD
Provider ID: 258121
Provider Gender: Female
NPI: 1619908936
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
550 WASHINGTON ST STE

300
SAN DIEGO, CA 92103
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

LUJAN, ARLEEN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A61687
NPI: 1760412431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

LUJAN, ARLEEN
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A61687
NPI: 1760412431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MADANY, GEORGE
License Type: MD
Provider ID: 205018
Provider Gender: Male
NPI: 1811968837
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP 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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

MAHENDRAN, SRIVIDYA
License Type: MD
Provider ID: 289872
Provider Gender: Female
License Number: A92173
NPI: 1487843454
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MAHENDRAN, SRIVIDYA
License Type: MD
Provider ID: 289872
Provider Gender: Female
License Number: A92173
NPI: 1487843454
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A75533
NPI: 1356397418
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA
License Type: MD
Provider ID: 46039
Provider Gender: Female
License Number: A75533
NPI: 1356397418
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PEDIATRICS

MARTINEZ-ANDREE, INGRID
License Type: MD
Provider ID: 204379
Provider Gender: Female
NPI: 1205807203
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

NGUYEN, JANICE
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A157335
NPI: 1760916589
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

PEDIATRICS

NGUYEN, JANICE
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A157335
NPI: 1760916589
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

PEDIATRICS

PARK, TARI

License Type: MD

Provider ID: 206277

Provider Gender: Female

NPI: 1285669085

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

Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

12036 SCRIPPS HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858) 566-4444

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

PAVLOVICH, WENDY

License Type: MD

Provider ID: 39198

Provider Gender: Female

License Number: A126181

NPI: 1740467299

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

PAVLOVICH, WENDY

License Type: MD

Provider ID: 39198

Provider Gender: Female

License Number: A126181

NPI: 1740467299

- *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

POWELL, STEPHANIE

License Type: MD

Provider ID: 204607

Provider Gender: Female

NPI: 1720059744

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

Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 400
SAN DIEGO, CA 92123

Phone: (858) 495-0500

Fax: (858) 560-4279

After Hours Phone: (858) 495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PEDIATRICS

PRESKILL, CATALINA

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: G29879

NPI: 1598088759

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

PRESKILL, CATALINA

License Type: MD

Provider ID: 289863

Provider Gender: Female

License Number: G29879

NPI: 1598088759

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

RODRIGUEZ, JAVIER

License Type: MD

Provider ID: 315861

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

LA MAESTRA FAMILY CLINIC

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

License Type: MD

Provider ID: 46039

Provider Gender: Male

License Number: A82639

NPI: 1013059385

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER
License Type: MD
Provider ID: 46039
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER
License Type: MD
Provider ID: 315861
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

RUBENSTEIN, STUART
License Type: MD
Provider ID: 276967
Provider Gender: Male
NPI: 1689633844
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
11943 EL CAMINO REAL
STE 210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SA 8AM-12PM

PEDIATRICS

SAMPATH, SRIVIDYA

License Type: MD

Provider ID: 39198

Provider Gender: Female

License Number: A132576

NPI: 1275892754

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

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

PEDIATRICS

SAMPATH, SRIVIDYA

License Type: MD

Provider ID: 39198

Provider Gender: Female

License Number: A132576

NPI: 1275892754

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

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

PEDIATRICS

SEBSO, JODI

License Type: MD

Provider ID: 39198

Provider Gender: Female

License Number: A103099

NPI: 1538484316

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104

- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SEBSO, JODI

License Type: MD

Provider ID: 25731

Provider Gender: Female

License Number: A103099

NPI: 1538484316

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

SEBSO, JODI
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A103099
NPI: 1538484316
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PEDIATRICS

SEBSO, JODI
License Type: MD
Provider ID: 39198
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: CONTACT PROVIDER

PEDIATRICS

SHENOY, ASHVIN
License Type: MD
Provider ID: 206334
Provider Gender: Male
NPI: 1619262664
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

SHETH, HASMUKH
License Type: MD
Provider ID: 217520
Provider Gender: Male
License Number: A45942
NPI: 1396812236
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SHETH, HASMUKH
License Type: MD
Provider ID: 217520
Provider Gender: Male
License Number: A45942
NPI: 1396812236
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SHIAU, NANCY
License Type: MD
Provider ID: 206325
Provider Gender: Female
NPI: 1750352779
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A76785
NPI: 1851323315
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A76785
NPI: 1851323315
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 87122
Provider Gender: Female
License Number: A76785
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A76785
NPI: 1851323315
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,

GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 87122
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA
License Type: MD
Provider ID: 25608
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SUBRAMANIAN, RAMA
License Type: MD
Provider ID: 304383
Provider Gender: Female
NPI: 1932593506
Provider English Spoken: Y
Provider Language(s) Spoken: Tamil
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

SULEIMAN-QAFITI, KHAWLA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A51318
NPI: 1659303121
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

PEDIATRICS

SULEIMAN-QAFITI, KHAWLA
License Type: MD
Provider ID: 39198
Provider Gender: Female
License Number: A51318
NPI: 1659303121
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
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: CONTACT PROVIDER
Hours: M-TH 8AM-5PM

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 35571
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 35571
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

TAMAYO, MAITHE
License Type: MD
Provider ID: 25731
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

WASSON, MINA
License Type: MD
Provider ID: 312057
Provider Gender: Female
NPI: 1366753022
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
12036 SCRIPPS HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

WATERS, ELIZABETH
License Type: MD
Provider ID: 205058
Provider Gender: Female
NPI: 1730477621
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

WEATHERLY, JACOB
License Type: MD
Provider ID: 300981
Provider Gender: Male
NPI: 1538520457
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8:30AM-12PM

PEDIATRICS

WONG, IAN
License Type: DO
Provider ID: 310731
Provider Gender: Male
NPI: 1174152128
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
Fax: (858) 793-1035
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

WONG, YOLANDA
License Type: MD
Provider ID: 289872
Provider Gender: Female
License Number: A94449
NPI: 1851599872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM

PEDIATRICS

WONG, YOLANDA
License Type: MD
Provider ID: 289872
Provider Gender: Female
License Number: A94449
NPI: 1851599872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM

PEDIATRICS

ZAHEER, AARON
License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: A61238
NPI: 1902882301
Provider English Spoken: Y
Provider Language(s) Spoken: Persian, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ZAHEER, AARON

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: MD
Provider ID: 289881
Provider Gender: Male
License Number: A61238
NPI: 1902882301
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Persian, Spanish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105
- *Phone: (619) 280-2058*
- *After Hours Phone: (619) 280-2058*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ZAHEER, AARON
License Type: MD
Provider ID: 289872
Provider Gender: Male
License Number: A61238
NPI: 1902882301
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Persian, Spanish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 7011 LINDA VISTA RD
  SAN DIEGO, CA 92111
- *Phone: (858) 810-8700*
- *After Hours Phone: (858) 810-8700*
- *Website: www.sdfamilycare.org*

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

PEDIATRICS

ZAHEER, AARON
License Type: MD
Provider ID: 289881
Provider Gender: Male
License Number: A61238
NPI: 1902882301
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Persian, Spanish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105
- *Phone: (619) 280-2058*
- *After Hours Phone: (619) 280-2058*
- *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

ALVARADO, EDMUND
License Type: PA
Provider ID: 97440
Provider Gender: Male
License Number: PA20888
NPI: 1720303340
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 2325 COMMERCIAL ST STE

1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ALVARADO, EDMUND
License Type: PA
Provider ID: 97440
Provider Gender: Male
License Number: PA20888
NPI: 1720303340
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE
License Type: PA
Provider ID: 46039
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE
License Type: PA
Provider ID: 46039
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N

Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA
License Type: PA
Provider ID: 289863
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500

After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA
License Type: PA
Provider ID: 289863
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
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: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

PHYSICIANS ASSISTANT

DAVID, MARVIC
License Type: PA
Provider ID: 25731
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

DAVID, MARVIC
License Type: PA
Provider ID: 25731
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

DRAME, SALWA
License Type: PA
Provider ID: 100648
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

DRAME, SALWA
License Type: PA
Provider ID: 100648
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

FINK, PATRICK
License Type: PA
Provider ID: 25608
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

FINK, PATRICK
License Type: PA
Provider ID: 25608
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

GARCIA, DEANA
License Type: PA
Provider ID: 39198

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: PA21042
NPI: 1447567995
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GARCIA, DEANA
License Type: PA
Provider ID: 39198
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HIGUERA, EDITH
License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA51283
NPI: 1558782029
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCI HEALTH-LOS ALAMITOS
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

HIGUERA, EDITH
License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA51283
NPI: 1558782029
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCI HEALTH-LOS ALAMITOS
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

License Type: PA

Provider ID: 103499

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

Phone: (619) 515-2454

After Hours Phone: (619) 515-2454

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

License Type: PA

Provider ID: 103499

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

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

PHYSICIANS ASSISTANT

LAPINA, LORI
License Type: PA
Provider ID: 100421
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LAPINA, LORI
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

PHYSICIANS ASSISTANT

LAPINA, LORI
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

PHYSICIANS ASSISTANT

LAPINA, LORI
License Type: PA
Provider ID: 100421
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LAPINA, LORI
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

PHYSICIANS ASSISTANT

LAPINA, LORI
License Type: PA
Provider ID: 25732
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8AM-5PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
License Type: PA
Provider ID: 87122
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
License Type: PA
Provider ID: 71153
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
License Type: PA
Provider ID: 71153
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW
License Type: PA
Provider ID: 87122
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO
License Type: PA
Provider ID: 100421
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO
License Type: PA
Provider ID: 100648
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO
License Type: PA
Provider ID: 100648
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO
License Type: PA
Provider ID: 100421
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE
License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE
License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PHYSICIANS ASSISTANT

MERCER, KELLY
License Type: PA
Provider ID: 46039
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-2PM

PHYSICIANS ASSISTANT

MILLER, LAUREL
License Type: PA
Provider ID: 78906
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MILLER, LAUREL
License Type: PA
Provider ID: 78906
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

NUNO, JOSE
License Type: PA
Provider ID: 25731
Provider Gender: Male
License Number: PA15227
NPI: 1275543068
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PHUNG, AIVI
License Type: PA
Provider ID: 289868
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

PHYSICIANS ASSISTANT

PHUNG, AIVI
License Type: PA
Provider ID: 289868
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

PHYSICIANS ASSISTANT

PHUNG, AIVI
License Type: PA
Provider ID: 289868
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

PHYSICIANS ASSISTANT

PHUNG, AIVI
License Type: PA
Provider ID: 289868
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

PHYSICIANS ASSISTANT

POLLEY, SHANNON
License Type: PA
Provider ID: 78906
Provider Gender: Female
License Number: PA60864
NPI: 1225608722
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

POLLEY, SHANNON

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: PA60864

NPI: 1225608722

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

License Type: PA

Provider ID: 25731

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

License Type: PA

Provider ID: 25731

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

License Type: PA

Provider ID: 37723

Provider Gender: Female

License Number: PA52141

NPI: 1407855828

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

License Type: PA

Provider ID: 37723

Provider Gender: Female

License Number: PA52141

NPI: 1407855828

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

License Type: PA

Provider ID: 87122

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MERCY HOSPITAL OF FOLSOM

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

License Type: PA

Provider ID: 87122

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MERCY HOSPITAL OF FOLSOM

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: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

License Type: PA

Provider ID: 87122

Provider Gender: Male

License Number: PA53288

NPI: 1699053843

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

License Type: PA

Provider ID: 87122

Provider Gender: Male

License Number: PA53288

NPI: 1699053843

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: PA58081

NPI: 1215264452

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: MT2061555

NPI: 1215264452

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: PA58081

NPI: 1215264452

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: PA58081

NPI: 1215264452

Provider English Spoken: Y

Cultural Competency: N

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

License Type: PA

Provider ID: 78906

Provider Gender: Female

License Number: MT2061555

NPI: 1215264452

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TREUNER, JULIE

License Type: PA

Provider ID: 25731

Provider Gender: Female

License Number: PA17478

NPI: 1922013614

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

TREUNER, JULIE

License Type: PA

Provider ID: 25731

Provider Gender: Female

License Number: PA17478

NPI: 1922013614

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

License Type: PA

Provider ID: 25731

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

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

PHYSICIANS ASSISTANT

TURNER, SHEREENA
License Type: PA
Provider ID: 25731
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

UDOH, EKAETE
License Type: PA
Provider ID: 112894
Provider Gender: Male
License Number: PA19664
NPI: 1841472776
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

UDOH, EKAETE
License Type: PA
Provider ID: 112894
Provider Gender: Male
License Number: PA19664
NPI: 1841472776
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

VARGAS, ROBERT
License Type: PA
Provider ID: 25731
Provider Gender: Male
License Number: PA11194
NPI: 1972528081
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

VARGAS, ROBERT
License Type: PA
Provider ID: 25731
Provider Gender: Male
License Number: PA11194
NPI: 1972528081
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI
License Type: PA
Provider ID: 289882
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI
License Type: PA
Provider ID: 289882
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

PODIATRIST

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

JUAREZ, LETICIA
License Type: DPM
Provider ID: 25731
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

JUAREZ, LETICIA
License Type: DPM
Provider ID: 25731
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 25731
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 25731
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 87122
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional 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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 87122
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA
License Type: DPM
Provider ID: 78906
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER

PODIATRIST

LE, DIANA

License Type: DPM

Provider ID: 78906

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

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

Cultural Competency: N

Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR, Foothill Regional Medical Center

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

- 4725 MARKET ST
  SAN DIEGO, CA 92102
- *Phone: (619) 515-2560*
- *After Hours Phone: (619) 515-2560*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PODIATRIST

MANCHEL, BRUCE

License Type: DPM

Provider ID: 307044

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

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

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 1666 PRECISION PARK LN
  SAN DIEGO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PODIATRIST

MANCHEL, BRUCE

License Type: DPM

Provider ID: 307044

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

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

Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

- 1666 PRECISION PARK LN
  SAN DIEGO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

PODIATRIST

PANEK, JOHN

License Type: DPM

Provider ID: 25517

Provider Gender: Male

License Number: DPM6016

NPI: 1295795599

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

OPERATION SAMAHAN

- 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

PODIATRIST

PANEK, JOHN
License Type: DPM
Provider ID: 25517
Provider Gender: Male
License Number: DPM6016
NPI: 1295795599
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 25608
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 25731
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 25731
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 87122
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 25608
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

SCHNEIDER, SARAH
License Type: DPM
Provider ID: 87122
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No

IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
License Type: MD
Provider ID: 289872
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
License Type: MD
Provider ID: 289872
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

810-8700
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
License Type: MD
Provider ID: 289868
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT

License Type: PT

Provider ID: 25731

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT

License Type: PT

Provider ID: 25731

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

REGISTERED PHYSICAL THERAPIST

CAMERON, IAN

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT291088

NPI: 1275993560

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

- *Phone: (619) 515-2545*
- *After Hours Phone: (619) 515-2545*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-9PM F 8AM-5PM*

REGISTERED PHYSICAL THERAPIST

CAMERON, IAN

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT291088

NPI: 1275993560

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

- *Phone: (619) 515-2545*
- *After Hours Phone: (619)*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

HERMES, MARY
License Type: PT
Provider ID: 25731
Provider Gender: Female
License Number: PT24707
NPI: 1518028547
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HERMES, MARY
License Type: PT
Provider ID: 25731
Provider Gender: Female
License Number: PT24707
NPI: 1518028547
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

LEE, RYANT
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT296601
NPI: 1659922177
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

LEE, RYANT
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT296601
NPI: 1659922177
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

SALES, JAN ERIC
License Type: PT
Provider ID: 100421
Provider Gender: Female
License Number: PT303890
NPI: 1417650169
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

SALES, JAN ERIC

License Type: PT

Provider ID: 100421

Provider Gender: Female

License Number: PT303890

NPI: 1417650169

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

License Type: PT

Provider ID: 100421

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

TOVAR, NICOLE

License Type: PT

Provider ID: 25731

Provider Gender: Female

License Number: PT33914

NPI: 1003088063

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

TOVAR, NICOLE
License Type: PT
Provider ID: 25731
Provider Gender: Female
License Number: PT33914
NPI: 1003088063
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
License Type: PT
Provider ID: 100421
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-9PM F 8AM-5PM

RHEUMATOLOGY

REDDY, DANA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A115598

NPI: 1144538778
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RHEUMATOLOGY

REDDY, DANA
License Type: MD
Provider ID: 78906
Provider Gender: Female
License Number: A115598
NPI: 1144538778
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RHEUMATOLOGY

REDDY, DANA
License Type: MD
Provider ID: 289863
Provider Gender: Female
License Number: A115598
NPI: 1144538778
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM

RHEUMATOLOGY

REDDY, DANA
License Type: MD
Provider ID: 289863

Provider Gender: Female
License Number: A115598
NPI: 1144538778
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- *Phone: (619) 233-8500*
- *After Hours Phone: (619) 233-8500*
- *Website: N/A*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM*

SPEECH PATHOLOGIST

MILLER, WILLIAM
License Type: SP
Provider ID: 25731
Provider Gender: Male
License Number: SP35150
NPI: 1972002210
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

SPEECH PATHOLOGIST

MILLER, WILLIAM
License Type: SP
Provider ID: 25731
Provider Gender: Male
License Number: SP35150
NPI: 1972002210
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

SPEECH PATHOLOGIST

WILLIAMS, JESSICA
License Type: SP
Provider ID: 25731
Provider Gender: Female
License Number: SP27677
NPI: 1932680006
- *Provider English Spoken: Y*

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

License Type: SP

Provider ID: 25731

Provider Gender: Female

License Number: SP27677

NPI: 1932680006

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SAN MARCOS

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH

License Type: NP

Provider ID: 289853

Provider Gender: Male

License Number: NP21334

NPI: 1598041261

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH

License Type: NP

Provider ID: 289853

Provider Gender: Male

License Number: NP21334

NPI: 1598041261

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: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH

License Type: NP

Provider ID: 289853

Provider Gender: Male

License Number: NP21334

NPI: 1598041261

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
License Type: NP
Provider ID: 289853
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
License Type: NP
Provider ID: 289853
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

CARROLL, JOSEPH
License Type: NP
Provider ID: 289853
Provider Gender: Male
License Number: NP21334
NPI: 1598041261
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
License Type: NP
Provider ID: 289853

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 289853
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 289853
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 289853
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 289853
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 289853
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA
License Type: NPF
Provider ID: 289853
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP20893

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1811262405

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

License Type: NP

Provider ID: 289853

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

License Type: NP

Provider ID: 289853

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

License Type: NP

Provider ID: 289853

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA
License Type: NP
Provider ID: 289853
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
License Type: NPF
Provider ID: 289853
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
License Type: NPF
Provider ID: 289853
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
License Type: NPF
Provider ID: 289853
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
License Type: NPF
Provider ID: 289853
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
License Type: NPF
Provider ID: 289853
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
License Type: NPF
Provider ID: 289853
Provider Gender: Male
License Number: NP95018633
NPI: 1710366489
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
License Type: CRNM
Provider ID: 289853
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NURSE MIDWIFE

BELANGER, TANYA

License Type: CRNM
Provider ID: 289853
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

License Type: CRNM
Provider ID: 289853
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

License Type: CRNM
Provider ID: 289853
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

License Type: CRNM
Provider ID: 289853
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR

MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
License Type: CRNM
Provider ID: 289853
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

FAMILY PRACTICE

NATH, DEVARSHI
License Type: MD
Provider ID: 296545
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

FAMILY PRACTICE

NATH, DEVARSHI
License Type: MD
Provider ID: 296545
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI
License Type: MD
Provider ID: 296545
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

License Type: MD

Provider ID: 296545

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

FQHC

TRUECARE,

Provider ID: 289853

NPI: 1245246917

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FQHC

TRUECARE,

Provider ID: 296545

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

TRUECARE,

Provider ID: 289853

NPI: 1598484255

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
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: CONTACT PROVIDER

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

FQHC

TRUECARE,

Provider ID: 296545

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

FQHC

TRUECARE,

Provider ID: 289853

NPI: 1811617939

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: 296545
NPI: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: 289853
NPI: 1598484255
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: 289853
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

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

FQHC

TRUECARE,
Provider ID: 296545
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

TRUECARE,
Provider ID: 296545
NPI: 1598484255
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FQHC

TRUECARE,
Provider ID: 289853
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: 296545
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s) Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s) Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

License Type: MD

Provider ID: 289853

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s) Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

License Type: MD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 289853
Provider Gender: Female
License Number: A71311
NPI: 1184735201
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Polish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD

Provider ID: 289853

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: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD

Provider ID: 289853

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: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD

Provider ID: 289853

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: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Spanish*

Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
- *Provider English Spoken: Y*

Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760)

736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A93248
NPI: 1174703680
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A93248
NPI: 1174703680
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A93248
NPI: 1174703680
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

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

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A93248
NPI: 1174703680
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

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

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 303889
Provider Gender: Female
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

MONAHAN, CAROLYN

License Type: MD

Provider ID: 238093

Provider Gender: Female

NPI: 1619973666

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified: Yes

RADY CHILDRENS HEALTH NETWORK

1582 W SAN MARCOS BLVD STE 203
SAN MARCOS, CA 92078

Phone: (760) 744-6710

Fax: (760) 744-6156

After Hours Phone: (760) 744-6710

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4PM

PEDIATRICS

NEVES, VANESSA

License Type: MD

Provider ID: 304036

Provider Gender: Female

NPI: 1174672547

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified: 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: CONTACT PROVIDER

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

PEDIATRICS

POSADAS, EMERITO

License Type: MD

Provider ID: 303872

Provider Gender: Male

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM

PEDIATRICS

POSADAS, EMERITO

License Type: MD

Provider ID: 289853

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: A48980
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: A48980
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: A48980
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO
License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: A48980
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO

License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: A48980
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO

License Type: MD
Provider ID: 289853
Provider Gender: Male
License Number: A48980
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

QUINTERO, CAROLYN

License Type: MD
Provider ID: 303854
Provider Gender: Female
NPI: 1023033156
Provider English Spoken: Y
Provider Language(s) Spoken: Afar, Spanish
Cultural Competency: N
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH

License Type: MD
Provider ID: 289853
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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PEDIATRICS

RAJARATNAM, AKASH
License Type: MD
Provider ID: 289853
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA
License Type: MD
Provider ID: 289853
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

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

PEDIATRICS

SOCHA, TRACI
License Type: DO
Provider ID: 224843
Provider Gender: Female
NPI: 1669478616
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
1582 W SAN MARCOS BLVD STE 203
SAN MARCOS, CA 92078
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760) 744-6710
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:45PM

PHYSICIANS ASSISTANT

CHISWICK, GARY
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW
License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Type: PA
Provider ID: 289853
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL

License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62228
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 296545
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 296545
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 296545
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 296545
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 296545
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 289853
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Number: PA62883
NPI: 1649906108
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
License Type: PA
Provider ID: 296545
Provider Gender: Female
License Number: PA62883
NPI: 1649906108
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PHYSICIANS ASSISTANT

SPENCE, JAMIE
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE
License Type: PA
Provider ID: 289853

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: PA21723
NPI: 1518133032
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
License Type: PA
Provider ID: 289853
Provider Gender: Female

License Number: PA51867
NPI: 1295147387
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH
License Type: PA
Provider ID: 289853
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

License Type: PA

Provider ID: 289853

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

License Type: PA

Provider ID: 289853

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PODIATRIST

DASGUPTA, DEBORSHI

License Type: DPM

Provider ID: 296545

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

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

Cultural Competency: N

Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

- *Phone: (760) 736-6767*
- *After Hours Phone: (760) 736-6767*
- *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

PODIATRIST

DASGUPTA, DEBORSHI

License Type: DPM

Provider ID: 296545

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

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

Cultural Competency: N

Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL,

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PODIATRIST

DASGUPTA, DEBORSHI
License Type: DPM
Provider ID: 296545
Provider Gender: Male
License Number: DPM5542
NPI: 1598129223
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PODIATRIST

DASGUPTA, DEBORSHI
License Type: DPM
Provider ID: 296545
Provider Gender: Male
License Number: DPM5542
NPI: 1598129223
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PODIATRIST

DASGUPTA, DEBORSHI
License Type: DPM
Provider ID: 296545
Provider Gender: Male
License Number: DPM5542
NPI: 1598129223
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND

SURGICAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PODIATRIST

DASGUPTA, DEBORSHI
License Type: DPM
Provider ID: 296545
Provider Gender: Male
License Number: DPM5542
NPI: 1598129223
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SAN YSIDRO

CARDIOVASCULAR DISEASE

PONCE, SONIA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A145008
NPI: 1164659033
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CARDIOVASCULAR DISEASE

PONCE, SONIA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A145008
NPI: 1164659033
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR

Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHAUSSE CASTRO, EKATERINA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

CHAUSSE CASTRO, EKATERINA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA
License Type: NP
Provider ID: 247960
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA
License Type: NP
Provider ID: 247960
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO
License Type: NP
Provider ID: 247760
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO
License Type: NP
Provider ID: 247760
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO
License Type: NP
Provider ID: 247960
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO
License Type: NP
Provider ID: 247960
Provider Gender: Male
License Number: NP95003024

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1215304860
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
License Type: NP
Provider ID: 247960
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
License Type: NP
Provider ID: 247960
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS
License Type: NP
Provider ID: 247960
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS
License Type: NP
Provider ID: 247960
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA
License Type: NP
Provider ID: 247760
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OCHOA, RAUL
License Type: DC
Provider ID: 247960
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OCHOA, RAUL
License Type: DC
Provider ID: 247960
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

CRUZ, MICHAEL
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 247960
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

ARRIETA, NOEMI
License Type: DO
Provider ID: 247960
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

BORSAN, COSMIN
License Type: DO
Provider ID: 247960
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

BORSAN, COSMIN
License Type: DO
Provider ID: 247960
Provider Gender: Male

License Number: 20A17643
NPI: 1679060255
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

CAMPOS, MELISSA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A138474
NPI: 1427475318
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A138474
NPI: 1427475318
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org

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

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA
License Type: MD
Provider ID: 247960
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: CONTACT PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A159673
NPI: 1902330723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

CASTILLO, STEPHANIE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A159673
NPI: 1902330723
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER

FAMILY PRACTICE

DALUGDUGAN, ESTHER
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A112511
NPI: 1962662718
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

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

FAMILY PRACTICE

DALUGDUGAN, ESTHER
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A112511
NPI: 1962662718
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DAVIS, CHARLES
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G41219
NPI: 1194840231
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

DAVIS, CHARLES
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G41219
NPI: 1194840231
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ESTRADA, JOHANNA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A127188
NPI: 1255698155
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

ESTRADA, JOHANNA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A127188
NPI: 1255698155
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEPEZ, DAVID

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A130348

NPI: 1205196029

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEPEZ, DAVID

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A130348

NPI: 1205196029

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOYA, MARY

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOYA, MARY

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 247960
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

NIKZAD, JASON
License Type: DO
Provider ID: 247960
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ORTEGA, LUIS
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A180886
NPI: 1558924936
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

ORTEGA, LUIS

License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A180886
NPI: 1558924936
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A145480
NPI: 1508286709
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

License Type: MD
Provider ID: 247760
Provider Gender: Female
License Number: A145480
NPI: 1508286709
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

License Type: MD
Provider ID: 247760
Provider Gender: Female
License Number: A145480
NPI: 1508286709
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A145480
NPI: 1508286709
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ROJAS, SARAH
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A139169
NPI: 1245645076
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

ROJAS, SARAH
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A139169
NPI: 1245645076
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

SHAHTAJI, ALAN
License Type: DO
Provider ID: 247960
Provider Gender: Male

License Number: 20A11087
NPI: 1972751089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN
License Type: DO
Provider ID: 247960
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SWEET, PATRICK
License Type: MD
Provider ID: 247960
Provider Gender: Male

License Number: A101827
NPI: 1457407702
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

SWEET, PATRICK
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A101827
NPI: 1457407702
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TALAVERA, GREGORY
License Type: MD
Provider ID: 247960

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TAN, LO FU
License Type: MD
Provider ID: 247760
Provider Gender: Male
License Number: C170935
NPI: 1356314835
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TAN, LO FU
License Type: MD
Provider ID: 247760
Provider Gender: Male
License Number: C170935
NPI: 1356314835
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

UTZ, JACK
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A183145
NPI: 1194353094
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

UTZ, JACK
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A183145
NPI: 1194353094

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,
Provider ID: 47414
NPI: 1558852947
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,
Provider ID: 247960
NPI: 1952364747
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-2PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,
Provider ID: 247960
NPI: 1952364747
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-2PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,
Provider ID: 247760
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,
Provider ID: 247760
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GENERAL PRACTICE

TEJEDA, FRANCISCO
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A66885
NPI: 1407940075
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

TEJEDA, FRANCISCO
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A66885
NPI: 1407940075
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: CONTACT PROVIDER

GYNECOLOGY

CALDERON, JORGE

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A40480

NPI: 1407800881

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, LOMPOC VALLEY MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

GYNECOLOGY

CALDERON, JORGE

License Type: MD

Provider ID: 247960

Provider Gender: Male

License Number: A40480

NPI: 1407800881

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, LOMPOC VALLEY MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INFECTIOUS DISEASE

PROMER, KATHERINE

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A131952

NPI: 1306280607

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

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INFECTIOUS DISEASE

PROMER, KATHERINE

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A131952

NPI: 1306280607

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A101017
NPI: 1073650339
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A101017
NPI: 1073650339
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A49267
NPI: 1689646572
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A49267
NPI: 1689646572
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A111118
NPI: 1710142708
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A111118
NPI: 1710142708
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A111118
NPI: 1710142708
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CHULA VISTA COMM HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

INTERNAL MEDICINE

HURST, MICHAEL

License Type: DO

Provider ID: 247960

Provider Gender: Male

License Number: 20A8081

NPI: 1205893104

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

Cultural Competency: N

Hospital Affiliation: SUTTER TRACY COMMUNITY HOSP, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INTERNAL MEDICINE

HURST, MICHAEL

License Type: DO

Provider ID: 247960

Provider Gender: Male

License Number: 20A8081

NPI: 1205893104

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

Cultural Competency: N

Hospital Affiliation: SUTTER TRACY COMMUNITY HOSP, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

INTERNAL MEDICINE

KAUFER, DAVID

License Type: MD

Provider ID: 247760

Provider Gender: Male

License Number: G80107

NPI: 1710082789

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD
SAN YSIDRO, CA 92173

- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

KAUFER, DAVID

License Type: MD

Provider ID: 247760

Provider Gender: Male

License Number: G80107

NPI: 1710082789

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD
SAN YSIDRO, CA 92173

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A138568
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A138568
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified: No

IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARK, DANIEL
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A99433
NPI: 1538371844
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

INTERNAL MEDICINE

PARK, DANIEL
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: A99433
NPI: 1538371844
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL 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: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

INTERNAL MEDICINE

POAST, JENNIFER
License Type: DO
Provider ID: 247960
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

POAST, JENNIFER
License Type: DO
Provider ID: 247960
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
Provider English Spoken: Y
Cultural Competency: N

Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A160493
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A160493
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: G81461
NPI: 1821299520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: G81461
NPI: 1821299520
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO
Provider ID: 247960
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, Sharp Grossmont Hospital
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

License Type: DO
Provider ID: 247960
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, Sharp Grossmont Hospital
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A113914
NPI: 1982812392
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A113914
NPI: 1982812392
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: C158543
NPI: 1912159674
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: C158543
NPI: 1912159674
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A72235

NPI: 1245229129

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

License Type: MD

Provider ID: 247960

Provider Gender: Female

License Number: A72235

NPI: 1245229129

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

License Type: MD

Provider ID: 47414

Provider Gender: Male

License Number: A63844

NPI: 1891867412

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A63844
NPI: 1891867412
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
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: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 47414
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 247960
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 247960
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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY
License Type: DO
Provider ID: 47414
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A175006
NPI: 1255878997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A175006
NPI: 1255878997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A175006
NPI: 1255878997
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A175006
NPI: 1255878997
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5PM*

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: C143625
NPI: 1285604702
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO
Board Certified: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

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

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: C143625
NPI: 1285604702
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM
License Type: MD
Provider ID: 247760
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM
License Type: MD
Provider ID: 247760
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ACEVEDO, SUSANA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A74960
NPI: 1801971569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A49307
NPI: 1982662193
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A49307
NPI: 1982662193
Provider English Spoken: Y
Provider Language(s)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A138938
NPI: 1134567530
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A138938
NPI: 1134567530
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

FUJII, CINDY
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: G52183
NPI: 1871664821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

FUJII, CINDY
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: G52183

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PEDIATRICS

HERMAN, ANDREA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A72721
NPI: 1518970037
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

HERMAN, ANDREA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A72721
NPI: 1518970037
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

NISSAN, BETI
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A64487
NPI: 1396705299
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PEDIATRICS

NISSAN, BETI
License Type: MD
Provider ID: 247960
Provider Gender: Female
License Number: A64487
NPI: 1396705299
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

RUELAS, ROBERTO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A170141
NPI: 1194257386
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

RUELAS, ROBERTO
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: A170141
NPI: 1194257386
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: G51462
NPI: 1780697276
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G51462
NPI: 1780697276
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER
Hours: M-F 8AM-7:30PM SA 8:30AM-2PM

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 47414
Provider Gender: Male
License Number: G51462
NPI: 1780697276
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SAHMS, TIMOTHY
License Type: MD
Provider ID: 247960
Provider Gender: Male
License Number: G51462
NPI: 1780697276
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-7:30PM SA 8:30AM-2PM

PEDIATRICS

SHAHIDYAZDANI, TINA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A94813
NPI: 1891924858
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

SHAHIDYAZDANI, TINA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A94813
NPI: 1891924858
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

SULLIVAN, ELISSA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A169577
NPI: 1790216422
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

PEDIATRICS

SULLIVAN, ELISSA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A169577
NPI: 1790216422
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

PEDIATRICS

TAYLOR, TASHA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A82187
NPI: 1528144433
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

TAYLOR, TASHA
License Type: MD
Provider ID: 47414
Provider Gender: Female
License Number: A82187
NPI: 1528144433
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA18363
NPI: 1215909205
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA18363
NPI: 1215909205
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KAMOTO, LYNN
License Type: PA
Provider ID: 247960
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KAMOTO, LYNN
License Type: PA
Provider ID: 247960
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE
License Type: PA
Provider ID: 47414
Provider Gender: Female
License Number: PA16269
NPI: 1053403782
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE
License Type: PA
Provider ID: 47414
Provider Gender: Female
License Number: PA16269
NPI: 1053403782
Provider English Spoken: Y
Cultural Competency: N
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PHYSICIANS ASSISTANT

ROSS, COLLIN
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA16058
NPI: 1629182050
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA16058
NPI: 1629182050
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA12304
NPI: 1902016611
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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS
License Type: PA
Provider ID: 247960
Provider Gender: Male
License Number: PA12304
NPI: 1902016611
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: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

License Type: PA

Provider ID: 247760

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

License Type: PA

Provider ID: 247760

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

Provider English Spoken: Y

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

License Type: PA

Provider ID: 247960

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

License Type: PA

Provider ID: 247960

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE

License Type: DPM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 247760
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE
License Type: DPM
Provider ID: 247760
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE
License Type: DPM
Provider ID: 247960
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE
License Type: DPM
Provider ID: 247960
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SANTEE

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
License Type: NP
Provider ID: 275285
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 445-6687
After Hours Phone: (619) 445-6687
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 10:30AM-11:45AM

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
License Type: NP
Provider ID: 275285
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
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
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 10:30AM-11:45AM

CHIROPRACTOR

KELCHNER, MATTHEW
License Type: DC
Provider ID: 275285
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 10:30AM-11:45AM

CHIROPRACTOR

KELCHNER, MATTHEW
License Type: DC
Provider ID: 275285
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP

120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 10:30AM-11:45AM

FAMILY PRACTICE

BAIOU, MOHAMED
License Type: MD
Provider ID: 275285
Provider Gender: Male
License Number: A149492
NPI: 1447542659
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,
Provider ID: 275285
NPI: 1376184911
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
Fax: (619) 873-3476
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

BAIOU, MOHAMED
License Type: MD
Provider ID: 275285
Provider Gender: Male
License Number: A149492
NPI: 1447542659
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,
Provider ID: 275285
NPI: 1376184911
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
Fax: (619) 873-3476
After Hours Phone: (619) 662-4100
Website: www.syhealth.org

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

INTERNAL MEDICINE

CORBIN, DAVID
License Type: MD
Provider ID: 275285
Provider Gender: Male
License Number: C169916
NPI: 1275627200
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

CORBIN, DAVID
License Type: MD
Provider ID: 275285
Provider Gender: Male
License Number: C169916
NPI: 1275627200
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

INTERNAL MEDICINE

GUERRA, JACQUELINE
License Type: MD
Provider ID: 275285
Provider Gender: Female
License Number: A151449
NPI: 1649685074
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GOLETA VALLEY COTTAGE HOSP
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 10:30AM-11:45AM

INTERNAL MEDICINE

GUERRA, JACQUELINE
License Type: MD
Provider ID: 275285
Provider Gender: Female
License Number: A151449
NPI: 1649685074

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GOLETA VALLEY COTTAGE HOSP
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: CONTACT PROVIDER
Hours: M 10:30AM-11:45AM

PEDIATRICS

ARLATA, TAMANTHA
License Type: MD
Provider ID: 297749
Provider Gender: Female
NPI: 1568721934
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619) 749-2150
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

IKE, ERICA
License Type: DO
Provider ID: 275285
Provider Gender: Female
License Number: 20A16603
NPI: 1821413907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOHNS MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

IKE, ERICA
License Type: DO
Provider ID: 275285
Provider Gender: Female
License Number: 20A16603
NPI: 1821413907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOHNS MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Hours: M-F 8AM-5PM

PEDIATRICS

MANGINE, REGINA

License Type: MD

Provider ID: 204821

Provider Gender: Female

NPI: 1417177577

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

9600 CUYAMACA ST STE 101
SANTEE, CA 92071

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619) 749-2150

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP

Provider ID: 25735

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

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

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619) 515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

License Type: NP

Provider ID: 25735

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

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

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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

License Type: NP

Provider ID: 25735

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Spoken: Spanish
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA
License Type: NP
Provider ID: 25735
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 25735
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA
License Type: DO
Provider ID: 25735
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR
License Type: MD
Provider ID: 25735
Provider Gender: Male
License Number: A55932
NPI: 1962436451
Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR
License Type: MD
Provider ID: 25735
Provider Gender: Male
License Number: A55932
NPI: 1962436451
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CONSTANTINO, STEPHANIE
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A149063
NPI: 1366824971
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

FAMILY PRACTICE

CONSTANTINO, STEPHANIE
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A149063
NPI: 1366824971
Provider English Spoken: Y
Provider Language(s) 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: CONTACT

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

FAMILY PRACTICE

ROSE, PATRICIA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A76059
NPI: 1588677314
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A76059
NPI: 1588677314
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,
Provider ID: 25735
NPI: 1508801069
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
Fax: (619) 462-5584
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,
Provider ID: 25735
NPI: 1508801069
Provider English Spoken: Y
Cultural Competency: N
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
Fax: (619) 462-5584
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

NARAYANAN, MEENA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619) 515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

NARAYANAN, MEENA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A113448

NPI: 1508170697

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP 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: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619) 515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A68463

NPI: 1376663831

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

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM TU 8:30AM-7PM W-F 8:30AM-5:30PM*

PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 25735

Provider Gender: Male

License Number: A113001

NPI: 1225231582

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM TU 8:30AM-7PM W-F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

License Type: MD

Provider ID: 25735

Provider Gender: Male

License Number: A113001

NPI: 1225231582

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM TU 8:30AM-7PM W-F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A163464

NPI: 1326531401

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

License Type: MD

Provider ID: 25735

Provider Gender: Female

License Number: A163464

NPI: 1326531401

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD

Provider ID: 25735

Provider Gender: Male

License Number: A108228

NPI: 1629277322

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

License Type: MD

Provider ID: 25735

Provider Gender: Male

License Number: A108228

NPI: 1629277322

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA 91977

- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

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

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No

FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 25735
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA
License Type: DO
Provider ID: 25735
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25735
Provider Gender: Male
License Number: G78814

NPI: 1699790634
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 8788 JAMACHA RD SPRING VALLEY, CA 91977
- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
License Type: MD
Provider ID: 25735
Provider Gender: Male
License Number: G78814
NPI: 1699790634
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 8788 JAMACHA RD SPRING VALLEY, CA 91977
- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

PEDIATRICS

JI, AMANDA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A169342
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: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*

PEDIATRICS

JI, AMANDA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A169342
NPI: 1750745493
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
- 8788 JAMACHA RD SPRING VALLEY, CA 91977
- *Phone: (619) 515-2555*
- *After Hours Phone: (619) 515-2555*
- *Website: www.fhcsd.org*

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

PEDIATRICS

JI, AMANDA
License Type: MD
Provider ID: 25735
Provider Gender: Female
License Number: A169342
NPI: 1750745493
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO
License Type: PA
Provider ID: 25735
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO
License Type: PA
Provider ID: 25735
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN
License Type: PA
Provider ID: 25735
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN
License Type: PA
Provider ID: 25735

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: PA54588
NPI: 1598293748
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
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: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC
License Type: PA
Provider ID: 25735
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC
License Type: PA
Provider ID: 25735
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD HEALTHCARE,
Provider ID: 304652
NPI: 1437335148
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CLINIC OUTPATIENT

NEIGHBORHOOD HEALTHCARE,
Provider ID: 304652
NPI: 1437335148
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

AYON MARTINEZ, CARLOS
License Type: MD
Provider ID: 304652
Provider Gender: Male
License Number: A114419
NPI: 1154583128
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AYON MARTINEZ, CARLOS
License Type: MD
Provider ID: 304652
Provider Gender: Male
License Number: A114419
NPI: 1154583128
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 304652
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9912
After Hours Phone: (760) 742-9912
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

CASTANER, ZALYA
License Type: MD
Provider ID: 304652

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9912
After Hours Phone: (760) 742-9912
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FAMILY PRACTICE

SCHULTZ, JAMES
License Type: MD
Provider ID: 304652
Provider Gender: Male
License Number: G61829
NPI: 1356376164
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES
License Type: MD
Provider ID: 304652
Provider Gender: Male
License Number: G61829
NPI: 1356376164
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Modern Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

NEIGHBORHOOD HEALTHCARE,
Provider ID: 304652
NPI: 1437335148
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes

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

FQHC

NEIGHBORHOOD HEALTHCARE,
Provider ID: 304652
NPI: 1437335148
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

CRAYCHEE, LEO
License Type: MD
Provider ID: 205034
Provider Gender: Male
NPI: 1265432710
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
28714 VALLEY CENTER RD
STE L
VALLEY CENTER, CA 92082
Phone: (760) 749-7770
Fax: (760) 751-9988
After Hours Phone: (760) 749-7770
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM

VISTA

CERTIFIED NURSE PRACTITIONER

BJORNSON, MICHELE
License Type: NP
Provider ID: 289896
Provider Gender: Female
License Number: NP95001884
NPI: 1952792780
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: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BJORNSON, MICHELE
License Type: NP
Provider ID: 289896
Provider Gender: Female
License Number: NP95001884
NPI: 1952792780
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289896
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING
License Type: NP
Provider ID: 289896
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
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: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
License Type: NP
Provider ID: 289896
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

KELLEHER, BRIDGET

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, JINA

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95020624

NPI: 1225500259

- *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: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, JINA

License Type: NP

Provider ID: 289896

Provider Gender: Female

License Number: NP95020624

NPI: 1225500259

- *Provider English Spoken: Y*

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR

JU, NATHANIEL

License Type: DC

Provider ID: 289896

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

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

Cultural Competency: N

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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

CHIROPRACTOR

JU, NATHANIEL
License Type: DC
Provider ID: 289896
Provider Gender: Male
License Number: DC32054
NPI: 1972883882
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289896
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH
License Type: DO
Provider ID: 289896
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 289896
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

FAMILY PRACTICE

KETCHEL, CLINT
License Type: MD
Provider ID: 289896
Provider Gender: Male
License Number: A135564
NPI: 1699038125
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

FQHC

VCC DURIAN,
Provider ID: 289898
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5PM TH-F 8:30AM-5PM

FQHC

VCC DURIAN,
Provider ID: 289898
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844) 308-5003
Website: www.vistacommu

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

nityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5PM TH-F 8:30AM-5PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,
Provider ID: 289896
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

FQHC

VISTA COMMUNITY CLINIC GRAPEVINE,
Provider ID: 289896
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

PEDIATRICS

AMBO, STANLEY
License Type: MD
Provider ID: 204366
Provider Gender: Male
NPI: 1891735676
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2067 W VISTA WAY STE 180
VISTA, CA 92083
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PEDIATRICS

HARTFORD, NICOLE
License Type: DO
Provider ID: 289898
Provider Gender: Female
License Number: 20A14390
NPI: 1346530466
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IHP OF SOUTHERN CAL-PHP
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

HARTFORD, NICOLE
License Type: DO
Provider ID: 289898
Provider Gender: Female
License Number: 20A14390
NPI: 1346530466
Provider English Spoken: Y
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

KRAK, MICHAEL
License Type: MD
Provider ID: 302573
Provider Gender: Male
NPI: 1003989419
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
2067 W VISTA WAY STE 280
VISTA, CA 92083
Phone: (760) 941-3630
Fax: (760) 941-1214
After Hours Phone: (760) 941-3630
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-6PM SA 9AM-1PM

PEDIATRICS

LINARES, YENDI
License Type: MD
Provider ID: 317392
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
Accessibility: CONTACT

PROVIDER
Hours: SU 10AM-2PM M-F 8AM-5PM

PEDIATRICS

LUSCHWITZ, BRIAN
License Type: MD
Provider ID: 289896
Provider Gender: Male
License Number: A60517
NPI: 1205868510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
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: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

PEDIATRICS

LUSCHWITZ, BRIAN
License Type: MD
Provider ID: 289896
Provider Gender: Male
License Number: A60517
NPI: 1205868510
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
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: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

PEDIATRICS

NAUDIN, VERONICA
License Type: MD
Provider ID: 204706
Provider Gender: Female
NPI: 1093755878
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM

PEDIATRICS

NISHIKAWA, MOENA
License Type: MD
Provider ID: 310501

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRICS

PERTL, URSULA
License Type: MD
Provider ID: 291211
Provider Gender: Female
NPI: 1609947464
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES, PALOMAR MEDICAL CENTER
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2067 W VISTA WAY STE 180
VISTA, CA 92083
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-2PM
M-F 8AM-5PM
SA 8AM-12PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 289896
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PEDIATRICS

RONAN, KEVIN
License Type: MD
Provider ID: 289896
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

PHYSICIANS ASSISTANT

WEAVER, APRIL
License Type: PA
Provider ID: 289896
Provider Gender: Female
License Number: PA20775
NPI: 1063552800
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9AM-2PM
F 8AM-5PM
SA 8AM-4PM

PHYSICIANS ASSISTANT

WEAVER, APRIL
License Type: PA
Provider ID: 289896
Provider Gender: Female
License Number: PA20775
NPI: 1063552800
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: CONTACT PROVIDER
Hours: M-TH 9AM-2PM
F 8AM-5PM
SA 8AM-4PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

DOULA

CARAWAY, ARLENE

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

Accessibility: CONTACT PROVIDER

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

Website: www.forthevillage.org

DOULA

CARTER, LEXXUS

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

Accessibility: CONTACT PROVIDER

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

Website: www.forthevillage.org

DOULA

CENTENO QUIEL, JULISSA

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

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: www.forthevillage.org

DOULA

COOK, ROSALINE

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

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: www.forthevillage.org

DOULA

CORLEY MILNER, JANTENEE

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

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage .org*

DOULA

FOR THE VILLAGE INC,

,

- *Phone: (619) 657-3384*

Fax: (619) 374-2418

- *After Hours Phone: (619) 657-3384*

NPI: 1366156952

- *Provider English Spoken: Y*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*
- *Website: www.forthevillage .org*

DOULA

GRANT, PERRIETTE

Board Certified: No

FOR THE VILLAGE INC

,

- *Phone: (619) 657-3384*
- *After Hours Phone: (619) 657-3384*

Provider Gender: Female

NPI: 1740060466

- *Provider English Spoken: Y*

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): N

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage .org*

DOULA

HAMPTON, DESTINY

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

- *Accessibility: CONTACT PROVIDER*
- *Website: www.forthevillage .org*

DOULA

KNOX, LATANIA

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

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage .org*

DOULA

MERCADO FORSECK, ALEJANDRA

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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage.org*

DOULA

OMAE, ILANA
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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage.org*

DOULA

VALSAINT, JOSIANE
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*

Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Website: www.forthevillage.org*

DOULA

VARGAS, BRIANDA
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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage.org*

DOULA

WASHINGTON, KRYSTAL
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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-W 5PM-9AM TH-F 9AM-5PM*
- *Website: www.forthevillage*

.org

ALPINE

CHIROPRACTOR

PHILLIPS, KATHERINE

Provider ID: 310866

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TORRES, RANDALL

Provider ID: 306854

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: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

BRAWLEY

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 256218

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

207 W LEGION RD
BRAWLEY, CA 92227

Phone: (760) 351-3291

After Hours Phone: (760) 351-3291

Provider Gender: Male

NPI: 1417222472

Provider English Spoken: Y

Cultural Competency: N

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 256195

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

207 W LEGION RD
BRAWLEY, CA 92227

Phone: (760) 351-7643

After Hours Phone: (760) 351-7643

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CAMPO

FAMILY PRACTICE

BAUM, PETER
Provider ID: 296383
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 824-9071
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1174919971
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

CAMPOS, PRISCILLA
Provider ID: 314402
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 824-9071
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1508217399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROGERS, MATTHEW
Provider ID: 294843
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 824-9071
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1639606130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CARLSBAD

AUDIOLOGIST

ARHART, KESLEY
Provider ID: 316864
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE

CARLSBAD, CA 92008
Phone: (858) 909-0070
Fax: (858) 909-0880
After Hours Phone: (858) 909-0070
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

EARLES, LYDIA
Provider ID: 317317
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: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

SERENO, EMILY
Provider ID: 317154
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: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

RICE, ELIZABETH
Provider ID: 304664
Board Certified: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
NPI: 1902470537
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

DERMATOLOGY

ZUBAIR, RAHEEL
Provider ID: 306519
Board Certified: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Phone: (760) 448-4484

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (760) 448-4404
After Hours Phone: (760) 448-4484
Provider Gender: Male
NPI: 1326493024
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

FAMILY PRACTICE

CHAVEZ SANTOS, MARIA
Provider ID: 307651
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1780061440
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
Provider ID: 268654
Board Certified: No
COMMUNITY CARE IPA LLC
1820 MARRON RD STE 102
CARLSBAD, CA 92008
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760) 434-0125
Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

GALLAGHER, JEFFERY
Provider ID: 317182
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: 1457926370
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

DROKER, BRIAN
Provider ID: 306953
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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
W 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

HAMILTON, ROSS
Provider ID: 310675
Board Certified: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
NPI: 1538587852
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

OTOLARYNGOLOGY

CHANG, EDWARD
Provider ID: 309534
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1528146008
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OTOLARYNGOLOGY

DONALDSON, CHADWICK
Provider ID: 268146
Board Certified: No
COMMUNITY CARE IPA LLC
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1891743910
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, TEMECULA VALLEY HOSPITAL INC, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL,

SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICAL MEDICINE / REHABILITATION

BO, CHRISTOPHER
Provider ID: 315931
Board Certified: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
NPI: 1952863052
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN
Provider ID: 269004
Board Certified: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
NPI: 1598160343
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

INOCELDA, ANDREW
Provider ID: 269089
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

SHIMIZU, KELSIE

Provider ID: 296819
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1972107811
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: USC Arcadia Hospital, KECK HOSPITAL OF USC, USC KENNETH NORRIS JR CANCER HOSPITAL, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WILAND, WINONA
Provider ID: 296809
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1043967383
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER
Provider ID: 248010
Board Certified: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008
Phone: (760) 434-6100
Fax: (760) 471-5139
After Hours Phone: (760) 591-7750
Provider Gender: Male
NPI: 1114977535
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 8\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 7AM-7PM
TU 7AM-5PM
W 7AM-7PM
TH 7AM-5PM
F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

MCGEE, JACQUELINE
Provider ID: 252472
Board Certified: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008
Phone: (760) 434-6100
Fax: (760) 434-4583
After Hours Phone: (760) 434-6100
Provider Gender: Female
NPI: 1194217133
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 8\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-6PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 244069
Board Certified: 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, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD
Provider ID: 270283
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
Provider ID: 299996
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN
Provider ID: 203510
Board Certified: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Phone: (619) 543-5540
After Hours Phone: (619) 543-5540
Provider Gender: Male
NPI: 1609130921
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CHULA VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 299879
Board Certified: No
COMMUNITY CARE IPA LLC
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 300088
Board Certified: No
IHP OF SOUTHERN CAL-PHP
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

AUDIOLOGIST

ARHART, KESLEY
Provider ID: 316865
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

EARLES, LYDIA
Provider ID: 317319
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

SERENO, EMILY
Provider ID: 317156
Board Certified: No
COMMUNITY CARE IPA LLC
577 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 426-5181
Fax: (858) 909-0880
After Hours Phone: (619) 426-5181
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED ACUPUNCTURIST

LAM, KHANH
Provider ID: 295381
Board Certified: No
IHP OF SOUTHERN CAL-PHP
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1649594979
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH
Provider ID: 290591
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1598037178
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ARMSTON, LINDSEY
Provider ID: 309664
Board Certified: No
IHP OF SOUTHERN CAL-PHP
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 425-3842
After Hours Phone: (619) 425-3840
Provider Gender: Female
NPI: 1841851375
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BIMSTEIN, JAIME
Provider ID: 317044
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

CARRION-GELABERT, ANA
Provider ID: 302402
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 302418
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE LA CRUZ, ALEKSANDRYA
Provider ID: 309695
Board Certified: No
IHP OF SOUTHERN CAL-PHP
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 425-3842
After Hours Phone: (619) 425-3840
Provider Gender: Female
NPI: 1336625524
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 308352
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 3RD AVE STE 2220
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KEUM, SARAH
Provider ID: 312108
Board Certified: No
IHP OF SOUTHERN CAL-PHP
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Phone: (619) 371-9156
Fax: (619) 872-0997
After Hours Phone: (619) 371-9156
Provider Gender: Female
NPI: 1053183525
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301598
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

TRESSLAR, PERI
Provider ID: 312028
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Phone: (619) 567-7007
Fax: (619) 567-7775
After Hours Phone: (619) 567-7007
Provider Gender: Female
NPI: 1548021512
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 304935
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1811423072
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

ENDOCRINOLOGY METABOLISM DIABETES

CARRILLO, MARITZA
Provider ID: 290970
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1649628587

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BECERRA, MAURA
Provider ID: 313437
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SPAK, DARYL
Provider ID: 310870
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

CHAVEZ, LUIS
Provider ID: 311342
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
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

WIENER, GREGORY
Provider ID: 290741
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: CONTACT PROVIDER
Hours: M-TH 8:30AM-4:30PM F 8:30AM-3PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PHP

GASTROENTEROLOGY

WIENER, GREGORY
Provider ID: 257480
Board Certified: Yes
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Phone: (619) 585-8883
Fax: (619) 585-0166
After Hours Phone: (619) 585-8883
Provider Gender: Male
NPI: 1811099534
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-4:30PM F 8:30AM-3PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 268688
Board Certified: No
COMMUNITY CARE IPA LLC
310 3RD AVE STE C11
CHULA VISTA, CA 91910
Phone: (619) 426-0841
Fax: (619) 426-9197
After Hours Phone: (619) 426-0841
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268651

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: 1902853344

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

GALLAGHER, JEFFERY

Provider ID: 317180

Board Certified: No

COMMUNITY CARE IPA LLC

577 3RD AVE
CHULA VISTA, CA 91910

Phone: (858) 909-0707

Fax: (619) 426-0714

After Hours Phone: (858) 909-0707

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

HEMATOLOGY / ONCOLOGY

KANDAHARI, MASOOM

Provider ID: 315278

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: Male

NPI: 1467448100

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified: 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

Accessibility: CONTACT

PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 309249
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

NAGHI, JESSE
Provider ID: 247625
Board Certified: No
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619) 867-0557
Provider Gender: Male
NPI: 1386896736
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Bulgarian, Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, TRI CITY MEDICAL CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI
Provider ID: 268950
Board Certified: No
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619) 867-0557
Provider Gender: Male
NPI: 1154323996
Provider English Spoken: Y
Provider Language(s) Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL

HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 296051
Board Certified: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 309098
Board Certified: No
COMMUNITY CARE IPA LLC
865 3RD AVE STE 133
CHULA VISTA, CA 91911
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760) 294-0480
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 295846
Board Certified: No
IHP OF SOUTHERN CAL-PHP
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296993
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294653
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 264687
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont

Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA
Provider ID: 242523
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1760730758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH
Provider ID: 205646
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
435 H ST
CHULA VISTA, CA 91910
Phone: (619) 691-7000
After Hours Phone: (619) 691-7000
Provider Gender: Female
NPI: 1679809826
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 297976
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA
Provider ID: 262159
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
435 H ST
CHULA VISTA, CA 91910
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1497941397
Provider English Spoken: Y
Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301823
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
435 H ST
CHULA VISTA, CA 91910
Phone: (619) 691-7000
Fax: (619) 260-7055
After Hours Phone: (619) 691-7000
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK
Provider ID: 304829
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GUPTA, MONIKA
Provider ID: 307937
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS
Provider ID: 309932
Board Certified: No
IHP OF SOUTHERN CAL-PHP
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 425-3842
After Hours Phone: (619) 425-3840
Provider Gender: Male
NPI: 1205084183
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, MAYERS MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM
Provider ID: 306707
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Male
NPI: 1881182079
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Spanish, Tagalog*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE
Provider ID: 295744
Board Certified: No
IHP OF SOUTHERN CAL-PHP
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 485-5440
- *After Hours Phone: (619) 425-3840*

Provider Gender: Male
NPI: 1225474034
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-6PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
Provider ID: 290331
Board Certified: Yes
IHP OF SOUTHERN CAL-PHP
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
Phone: (619) 482-8406
Fax: (619) 482-6656
- *After Hours Phone: (619) 482-8406*

Provider Gender: Male
NPI: 1033138714
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-5PM F 8AM-12PM*
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
Provider ID: 268953
Board Certified: Yes
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
Phone: (619) 482-8406
Fax: (619) 482-6656
- *After Hours Phone: (619) 482-8406*

Provider Gender: Male
NPI: 1033138714
- *Provider English Spoken: Y*

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM F 8AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OCCUPATIONAL THERAPIST

MORRIS, SHEILA
Provider ID: 268926
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 7AM-6PM SA 7AM-2PM
Website: N/A
IPA: Community Care IPA LLC

OPHTHALMOLOGY

GOLDMAN, DAVID
Provider ID: 308450
Board Certified: No
COMMUNITY CARE IPA LLC
311 DEL MAR AVE
CHULA VISTA, CA 91910
Phone: (619) 427-3355
Fax: (619) 427-0955
After Hours Phone: (619) 427-3355
Provider Gender: Male
NPI: 1629185467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

GOLDMAN, DAVID
Provider ID: 308604
Board Certified: No
IHP OF SOUTHERN CAL-PHP
311 DEL MAR AVE
CHULA VISTA, CA 91910
Phone: (619) 427-3355
Fax: (619) 427-0955
After Hours Phone: (619) 427-3355
Provider Gender: Male
NPI: 1629185467
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

MUNDAE, RUSDEEP
Provider ID: 316980
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

SHAH, SONA
Provider ID: 314736
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: Female
NPI: 1750943403
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KECK HOSPITAL OF USC, USC KENNETH NORRIS JR CANCER HOSPITAL, USC VERDUGO HILLS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-5PM F 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

CHAIN, PEI CHI
Provider ID: 297621
Board Certified: No
IHP OF SOUTHERN CAL-PHP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-2025
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1730676727
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

HO, AMIEE
Provider ID: 297633
Board Certified: No
IHP OF SOUTHERN CAL-PHP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1396009478
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 304830
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 304537
Board Certified: No
IHP OF SOUTHERN CAL-PHP
835 3RD AVE STE A
CHULA VISTA, CA 91911
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 306902
Board Certified: No
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

RICHARDSON, JULIA
Provider ID: 297645
Board Certified: No
IHP OF SOUTHERN CAL-PHP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-2025
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1770154528
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

SCOVILL, ALEXANDRA

Provider ID: 297625

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN

Provider ID: 310536

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: 1053841478

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN

Provider ID: 312234

Board Certified: No

COMMUNITY CARE IPA LLC

835 3RD AVE STE A
CHULA VISTA, CA 91911

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1053841478

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN

Provider ID: 310877

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: 1053841478

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OTOLARYNGOLOGY

CHANG, EDWARD
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: 1528146008
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA
Provider ID: 303782
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL
Provider ID: 311161
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Male
NPI: 1336727791
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
NPI: 1366622078
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 275787
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1316162324
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL
Provider ID: 295669
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY
Provider ID: 311933
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1992202964
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 289411
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

ROWHANI, NAGHMEH
Provider ID: 306065
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
Provider English Spoken: Y
Provider Language(s) Spoken: Persian
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\17
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY
Provider ID: 295275
Board Certified: No
IHP OF SOUTHERN CAL-PHP
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1407052459
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

GI, HUNG
Provider ID: 302126
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

GUTH, CARA
Provider ID: 299110
Board Certified: No
IHP OF SOUTHERN CAL-PHP
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Phone: (619) 425-9510
Fax: (858) 455-7197
After Hours Phone: (619) 425-9510
Provider Gender: Female
NPI: 1992177182
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 309072
Board Certified: No
COMMUNITY CARE IPA LLC
429 BROADWAY
CHULA VISTA, CA 91910
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
NPI: 1679008379
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 265072
Board Certified: No
COMMUNITY CARE IPA LLC
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
NPI: 1679008379
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA

VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

MARISCAL, MIGUEL
Provider ID: 308408
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 3RD AVE STE 2200
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1760508923
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER
Provider ID: 295945
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309
Provider Gender: Male
NPI: 1922505775
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER
Provider ID: 295828
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309
Provider Gender: Male
NPI: 1922505775
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER
Provider ID: 268744
Board Certified: 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: 16\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

BRAZIER, SETH
Provider ID: 306399
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PODIATRIST

CAINE, SAMUEL
Provider ID: 308211
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: 1396230298
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL
Provider ID: 308636
Board Certified: No
IHP OF SOUTHERN CAL-PHP
345 F ST STE 100
CHULA VISTA, CA 91910
Phone: (619) 427-3481

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (619) 420-7807
After Hours Phone: (619) 427-3481
Provider Gender: Male
NPI: 1396230298
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, JOHN
Provider ID: 312175
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: CONTACT PROVIDER
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, JOHN
Provider ID: 129545
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: CONTACT PROVIDER
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

READ, TRENTON
Provider ID: 296655
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Phone: (619) 631-4033

Fax: (619) 880-5057
After Hours Phone: (619) 631-4033
Provider Gender: Male
NPI: 1952963431
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PSYCHOLOGIST

BAYLON, ALDO
Provider ID: 290243
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1649429150
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

CELAYA, PATRICIA
Provider ID: 294875
Board Certified: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1952656902
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GOULD, HILARY
Provider ID: 290467
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: CONTACT PROVIDER
Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

WIJAYARATNE, IMANIE

Provider ID: 290092

Board Certified: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 245-1184

After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1932358355

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303101

Board Certified: No

COMMUNITY CARE IPA LLC

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Phone: (858) 939-5010

Fax: (619) 740-8499

After Hours Phone: (858) 939-5010

Provider Gender: Male

NPI: 1275929242

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 206393

Board Certified: No

COMMUNITY CARE IPA LLC

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Phone: (619) 502-5851

Fax: (619) 502-5865

After Hours Phone: (619) 502-5851

Provider Gender: Female

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED DIETITIAN / NUTRITIONIST

KRISHNAMURTHY, MEENAKSHI

Provider ID: 311656

Board Certified: No

IHP OF SOUTHERN CAL-PHP

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619) 427-1144

Provider Gender: Female

NPI: 1790304822

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED DIETITIAN / NUTRITIONIST

KRISHNAMURTHY, MEENAKSHI
Provider ID: 312557
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 3RD AVE STE 2210
CHULA VISTA, CA 91911
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
NPI: 1790304822
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED DIETITIAN / NUTRITIONIST

KRISHNAMURTHY, MEENAKSHI
Provider ID: 313088
Board Certified: No
COMMUNITY CARE IPA LLC
855 3RD AVE STE 2210
CHULA VISTA, CA 91911
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
NPI: 1790304822
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 304529
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 307786
Board Certified: No

COMMUNITY CARE IPA LLC
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1336894724
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 316364
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 310337
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHUNG, PETER
Provider ID: 314478
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

Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

CHUNG, PETER
Provider ID: 314477
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA
Provider ID: 305150
Board Certified: No
IHP OF SOUTHERN CAL-PHP
880 3RD AVE STE A
CHULA VISTA, CA 91911
Phone: (619) 205-4585
Fax: (619) 271-3183
After Hours Phone: (619) 205-4585
Provider Gender: Female
NPI: 1063170603
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 55\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 310382
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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 299889
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 316348
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 316396
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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 7AM-6PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 287100
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
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 310746
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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 7AM-6PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 301380
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: 1699357525
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, ALEXANDRA
Provider ID: 316236
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305014
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305013
Board Certified: No
COMMUNITY CARE IPA LLC
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457136269
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 316421
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 310381
Board Certified: No
COMMUNITY CARE IPA LLC
386 E H ST STE 203
CHULA VISTA, CA 91910
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457136269
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 316387
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 7AM-6PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 286782
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 310722
Board Certified: No
COMMUNITY CARE IPA LLC
386 E H ST STE 203
CHULA VISTA, CA 91910
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 7AM-6PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 301994
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
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

PASCUAL, CHRISTOPHER
Provider ID: 314203
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

PASCUAL, CHRISTOPHER
Provider ID: 314202
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 310371
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
Accessibility: CONTACT PROVIDER
Hours: M 7AM-7PM
W-TH 7AM-7PM
F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 316468
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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 7AM-7PM*
  TU 7AM-12PM
  W-TH 7AM-7PM
  F 7AM-12PM
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 301108
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 1392 E PALOMAR ST STE 503
  CHULA VISTA, CA 91913
- *Phone: (619) 482-3000*

Fax: (619) 482-3001
- *After Hours Phone: (619) 482-3000*

Provider Gender: Male
NPI: 1265481139
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 7AM-7PM*
  TU 7AM-12PM
  W-TH 7AM-7PM
  F 7AM-12PM
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 129142
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
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 7AM-7PM*
  TU 7AM-12PM
  W-TH 7AM-7PM
  F 7AM-12PM
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 301418
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 316422
Board Certified: No
IHP OF SOUTHERN CAL-PHP
386 E H ST STE 203
CHULA VISTA, CA 91910
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1760194302
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
W-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 305424
Board Certified: No
COMMUNITY CARE IPA LLC
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1760194302
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 310409
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH
Provider ID: 310419
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: 1083353650

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 316466

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: 1083353650

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VAISMAN, SAMANTHA

Provider ID: 311836

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VERISSIMO, TAYLOR

Provider ID: 310406

Board Certified: No

COMMUNITY CARE IPA LLC

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1124871629

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VERISSIMO, TAYLOR

Provider ID: 310405

Board Certified: No

COMMUNITY CARE IPA LLC

386 E H ST STE 203
CHULA VISTA, CA 91910

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)

482-3000
Provider Gender: Female
NPI: 1124871629
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 301532
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

CHWA, JEFFREY
Provider ID: 268780
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307884
Board Certified: No
IHP OF SOUTHERN CAL-PHP
333 H ST STE 5000
CHULA VISTA, CA 91910
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1073873501
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304607
Board Certified: No
IHP OF SOUTHERN CAL-PHP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Phone: (619) 576-7007
Fax: (619) 567-7775
After Hours Phone: (619) 576-7007
Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CORONADO

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301599
Board Certified: No
IHP OF SOUTHERN CAL-PHP
230 PROSPECT PL STE 210
CORONADO, CA 92118
Phone: (619) 299-0670
Fax: (858) 429-7929
After Hours Phone: (619) 299-0670
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
Provider ID: 268655
Board Certified: No
COMMUNITY CARE IPA LLC
801 ORANGE AVE
CORONADO, CA 92118
Phone: (619) 437-8154
Fax: (310) 989-3092
After Hours Phone: (619) 437-8154
Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY GENERAL

BORTZ, PASCAL
Provider ID: 313996
Board Certified: No
IHP OF SOUTHERN CAL-PHP
230 PROSPECT PL STE 340
CORONADO, CA 92118
Phone: (858) 457-4917
Fax: (858) 646-0019
After Hours Phone: (858) 457-4917
Provider Gender: Male
NPI: 1821330796
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

EL CAJON

CERTIFIED NURSE PRACTITIONER

ALVA, WENDY
Provider ID: 311724
Board Certified: No
COMMUNITY CARE IPA LLC
5442 SYCUAN RD
EL CAJON, CA 92019
Phone: (619) 445-0707
Fax: (619) 445-9764
After Hours Phone: (619) 445-0707
Provider Gender: Female
NPI: 1023085560
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

ARMSTON, LINDSEY
Provider ID: 312119
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CARRION-GELABERT, ANA
Provider ID: 312136
Board Certified: No
IHP OF SOUTHERN CAL-PHP
892 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 737-1117
Fax: (619) 880-8535
After Hours Phone: (619) 737-1117
Provider Gender: Female
NPI: 1023178233
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 312113
Board Certified: No
IHP OF SOUTHERN CAL-PHP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

892 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 737-1117
Fax: (619) 880-8535
After Hours Phone: (619) 737-1117
Provider Gender: Female
NPI: 1528632742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE LA CRUZ, ALEKSANDRYA
Provider ID: 312156
Board Certified: No
IHP OF SOUTHERN CAL-PHP
892 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 737-1117
Fax: (619) 880-8535
After Hours Phone: (619) 737-1117
Provider Gender: Female
NPI: 1336625524
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DOWNEY, NANCY
Provider ID: 311826
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARCIA, CATALINA
Provider ID: 311391
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Provider Gender: Female
NPI: 1659148104
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 302295
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NGUYEN, VANESSA
Provider ID: 312138
Board Certified: No
IHP OF SOUTHERN CAL-PHP
892 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 737-1117
Fax: (619) 880-8535
After Hours Phone: (619) 737-1117
Provider Gender: Female
NPI: 1376219246
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PIRTLE, KEYSHONE
Provider ID: 284244
Board Certified: No
COMMUNITY CARE IPA LLC
5442 SYCUAN RD
EL CAJON, CA 92019
Phone: (619) 445-0707
Fax: (619) 445-9764
After Hours Phone: (619) 445-0707
Provider Gender: Male
NPI: 1417567827
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC

DERMATOLOGY

LIN, SHINKO
Provider ID: 308218
Board Certified: No
COMMUNITY CARE IPA LLC
222 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115
Provider Gender: Female
NPI: 1205130036
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO
Provider ID: 306321
Board Certified: No
IHP OF SOUTHERN CAL-PHP
222 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115
Provider Gender: Female
NPI: 1205130036
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

GASTROENTEROLOGY

CHAVEZ, LUIS
Provider ID: 311341
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Phone: (619) 416-3510
Fax: (619) 243-3216
After Hours Phone: (619) 416-3510
Provider Gender: Male
NPI: 1295224905
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 268692
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
Provider ID: 268650
Board Certified: No
COMMUNITY CARE IPA LLC

1767 E MAIN ST
EL CAJON, CA 92021
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619) 440-6516
Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

MAY, LOUIS
Provider ID: 294916
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

MICHAEL, RAMI
Provider ID: 294908
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1467871673
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 309247
Board Certified: 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

Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI
Provider ID: 302988
Board Certified: No
COMMUNITY CARE IPA LLC
1380 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619) 867-0557
Provider Gender: Male
NPI: 1154323996
Provider English Spoken: Y
Provider Language(s) Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 309095
Board Certified: No
COMMUNITY CARE IPA LLC
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Phone: (619) 486-6512
Fax: (619) 616-2104
After Hours Phone: (619) 486-6512
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 295843
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Phone: (619) 486-6512
Fax: (619) 616-2104
After Hours Phone: (619) 486-6512
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEUROLOGY

GUPTA, MONIKA
Provider ID: 312122
Board Certified: No
IHP OF SOUTHERN CAL-PHP
892 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 737-1117
Fax: (619) 880-8535
After Hours Phone: (619) 737-1117
Provider Gender: Female
NPI: 1922243401
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS
Provider ID: 312140
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, MAYERS MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM
Provider ID: 312137
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 9AM-12:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 312118

Board Certified: No

IHP OF SOUTHERN CAL-PHP

892 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 737-1117

Fax: (619) 880-8535

After Hours Phone: (619) 737-1117

Provider Gender: Male

NPI: 1225474034

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

MUNDAE, RUSDEEP

Provider ID: 316983

Board Certified: No

IHP OF SOUTHERN CAL-PHP

231 W MAIN ST
EL CAJON, CA 92020

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA

Provider ID: 306904

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN

Provider ID: 312236

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: 1053841478

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN
Provider ID: 310538
Board Certified: No
IHP OF SOUTHERN CAL-PHP
231 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1053841478
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PEDIATRICS

MURADIAN-MOORE, SARAH
Provider ID: 311838
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (833) 867-4642
Fax: (360) 462-2746
After Hours Phone: (833) 867-4642
Provider Gender: Female
NPI: 1700205895
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ACOSTA, ANGELICA
Provider ID: 310413
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

INDA, PRISCILLA
Provider ID: 265073
Board Certified: No
COMMUNITY CARE IPA LLC
328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619) 930-9404
Provider Gender: Female
NPI: 1679008379
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Russian, Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

LE, TAYLOR
Provider ID: 304574
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Provider Gender: Female
NPI: 1396478400
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RAMOS, JACQUELYN
Provider ID: 301106
Board Certified: No
IHP OF SOUTHERN CAL-PHP
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Provider Gender: Female
NPI: 1003515131
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ARAIZA, ERNESTINA
Provider ID: 290286
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: 1568608636
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

WHEELER, KIM
Provider ID: 302144
Board Certified: No
IHP OF SOUTHERN CAL-PHP
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1700577434

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 11\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CAMPA, PATRICIA
Provider ID: 302398
Board Certified: No
IHP OF SOUTHERN CAL-PHP
860 JAMACHA RD STE 203
EL CAJON, CA 92019
Phone: (619) 573-6373
Fax: (619) 378-6578
After Hours Phone: (619) 573-6373
Provider Gender: Female
NPI: 1528079357
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CAMPA, PATRICIA
Provider ID: 312107
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD
Provider ID: 302403
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD
Provider ID: 312164
Board Certified: No
COMMUNITY CARE IPA LLC
860 JAMACHA RD STE 203

EL CAJON, CA 92019
Phone: (619) 573-6373
Fax: (619) 378-6578
After Hours Phone: (619) 573-6373
Provider Gender: Male
NPI: 1841307063
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

WILKINS, MARJORIE
Provider ID: 313820
Board Certified: No
COMMUNITY CARE IPA LLC
860 JAMACHA RD STE 203
EL CAJON, CA 92019
Phone: (619) 573-6373
Fax: (619) 378-6578
After Hours Phone: (619) 573-6373
Provider Gender: Female
NPI: 1699781062
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

EL CENTRO

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 277248
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN
Provider ID: 287653
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1417243239
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND

VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MINOKADEH, ANUSHIRVAN
Provider ID: 277351
Board Certified: Yes
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1053339093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE, JESSICA
Provider ID: 277410
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164809950
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PITTMAN, LILIANA
Provider ID: 285963
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TABAREZ, NORMA
Provider ID: 272979
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (866) 803-2262
After Hours Phone: (866) 803-2262
Provider Gender: Female
NPI: 1538535570
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 240024
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (760) 339-7100
After Hours Phone: (760) 339-7100
Provider Gender: Female
NPI: 1205214442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HUTCHISON, HEIDI
Provider ID: 272661
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (760) 339-7100
Fax: (760) 352-7612
After Hours Phone: (760) 339-7100
Provider Gender: Female
NPI: 1417483587
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH SIERRA VISTA, TWIN CITIES COMMUNITY HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: 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: 240161
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: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 239824
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: CONTACT PROVIDER
Hours: SU 8AM-8PM
M-F 8AM-5PM
SA 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

AKRAMI, KEVAN
Provider ID: 277342
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225364052
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

SWEENEY, DANIEL
Provider ID: 277369
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497892954
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AMANN, CHRISTOPHER
Provider ID: 277245
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1134326895
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 277388
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

GOWDA, ASHWIN
Provider ID: 277348
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366736092
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PAGE, BRADY
Provider ID: 307660
Board Certified: 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: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

RAMNATH, VENKTESH
Provider ID: 277358
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (760) 339-7202
After Hours Phone: (760) 339-7202
Provider Gender: Male
NPI: 1215911730
Provider English Spoken: Y
Provider Language(s) Spoken: French, Hindi, Kannada, Spanish
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR, HEALDSBURG HOSPITAL, Providence Redwood Memorial Hospital, Providence Redwood Memorial Hospital, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 277391
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851682728
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

WARDI, GABRIEL
Provider ID: 277341
Board Certified: No
UCSD MEDICAL GROUP
1415 ROSS AVE
EL CENTRO, CA 92243
Phone: (760) 339-7202
After Hours Phone: (760) 339-7202
Provider Gender: Male
NPI: 1720346083
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 313306
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID
Provider ID: 244089
Board Certified: No
UCSD MEDICAL GROUP
1671 W MAIN ST STE B
EL CENTRO, CA 92243
Phone: (855) 543-0555
Fax: (888) 539-8781
After Hours Phone: (855) 543-0555
Provider Gender: Male
NPI: 1093730251
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENCINITAS

CARDIOVASCULAR DISEASE

DURAN, EDWARD
Provider ID: 310052
Board Certified: No
UCSD MEDICAL GROUP
477 N EL CAMINO REAL
STE D300
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1578903936
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS
Provider ID: 310449
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 304139
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 311061
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA
Provider ID: 291412
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHAMBERS, KATRINA
Provider ID: 303521
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN
Provider ID: 301447
Board Certified: No
IHP OF SOUTHERN CAL-PHP
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558
Provider Gender: Female
NPI: 1003260894
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 268657
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

IORIO, ALANNA
Provider ID: 317361
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA
Provider ID: 282071
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093895047
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301602
Board Certified: No
IHP OF SOUTHERN CAL-PHP
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PAKENHAM, KATE
Provider ID: 296268
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1578299343
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8AM-8PM
M-F 8AM-8PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SAADA, HASSAN

Provider ID: 313176

Board Certified: No

COMMUNITY CARE IPA LLC

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760) 436-4558

Provider Gender: Male

NPI: 1760009518

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281856

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299940

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN

Provider ID: 310372

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

ENDOCRINOLOGY METABOLISM DIABETES

HUPFELD, CHRISTOPHER

Provider ID: 277111

Board Certified: 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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

SHAH, NIYATI

Provider ID: 312273

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: 1891136354

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

PATEL, JANKI

Provider ID: 305301

Board Certified: No

IHP OF SOUTHERN CAL-PHP

781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024

Phone: (760) 354-9697

Fax: (760) 635-5972

After Hours Phone: (760) 354-9697

Provider Gender: Female

NPI: 1548606668

Provider English Spoken: Y

Provider Language(s) Spoken: Gujarati, Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282164

Board Certified: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (858) 249-2560

Fax: (888) 539-8781
After Hours Phone: (858) 249-2560
Provider Gender: Male
NPI: 1144486929
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, CORONA REGIONAL MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCI HEALTH-FOUNTAIN VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 245575
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 282127
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS
Provider ID: 209562
Board Certified: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024
Phone: (858) 657-7200
After Hours Phone: (858) 657-7200
Provider Gender: Male
NPI: 1871767384
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 208641
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 312714
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 314184
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL BLDG D
ENCINITAS, CA 92024
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 277315
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS
Provider ID: 209384
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD
Provider ID: 209254
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: 1497713846
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 283286
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301821
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 633-6120
Fax: (760) 633-7385
After Hours Phone: (760) 633-6120
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 303905
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
354 SANTA FE DR
ENCINITAS, CA 92024

Phone: (760) 633-6120
Fax: (760) 633-7385
After Hours Phone: (760) 633-6120
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

BUI, JONATHAN
Provider ID: 269966
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
Phone: (760) 944-6377
Fax: (760) 944-3927
After Hours Phone: (760) 944-6377
Provider Gender: Male
NPI: 1730247974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

JINDAL, ANUJA
Provider ID: 206264
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: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA
Provider ID: 316535

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA
Provider ID: 206258
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311188
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291325
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: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 293447
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291336
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 293448
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 208682
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: 1396904876
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 303061
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1770702177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 311111
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1558708297
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 205617
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 267315
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 297012
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 205507
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 216413
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 205886
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1235287947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 311887
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1124580139
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

ZAIDI, NOORINA
Provider ID: 310607
Board Certified: No
IHP OF SOUTHERN CAL-PHP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Female
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 206085
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 310280
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1720584345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244900

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206112

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1124230909

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297035

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN

Provider ID: 311004

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Male
NPI: 1356796783
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER
Provider ID: 205696
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 966-4900
Fax: (760) 944-3927
After Hours Phone: (858) 966-4900
Provider Gender: Male
NPI: 1609801299
Provider English Spoken: Y
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 205688
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1023329885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 313254
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1235634015
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 239115
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1376705707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE
Provider ID: 314199
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: 1417222472
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE
Provider ID: 206299
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1417222472
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311396
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301641
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 310620
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

YOUNG, JOCELYN
Provider ID: 294676
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1306227491
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 310302
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 243043
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1871752451
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 294642
Board Certified: No

RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1144615659
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA
Provider ID: 246395
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287134
Board Certified: No
UCSD MEDICAL GROUP
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861624181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LANDIS, SARAH
Provider ID: 313723
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1144733676
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 293443
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386791028
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 302454
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-5545
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SUTTON, BRIAN
Provider ID: 272241
Board Certified: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Phone: (760) 598-1776
Fax: (760) 598-5744
After Hours Phone: (760) 598-1776
Provider Gender: Male
NPI: 1629174727
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

VANETSKY, GARY
Provider ID: 269152
Board Certified: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Male
NPI: 1417034489
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PODIATRIST

DUSTIN, ADAM
Provider ID: 275800
Board Certified: No
UCSD MEDICAL GROUP
326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024
Phone: (760) 436-5533
Fax: (760) 436-0611
After Hours Phone: (760) 436-5533
Provider Gender: Male
NPI: 1043389026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

GOMEZ, JUANITA
Provider ID: 291423
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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

NGUYEN, VUONG
Provider ID: 317415
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 278552

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA
Provider ID: 282143
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 201730
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY
Provider ID: 205497
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 206128
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 310987
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

UROLOGY

MOORE, SARAH
Provider ID: 311608
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: 1538620760

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

ESCONDIDO

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 300090
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Phone: (760) 738-5533
Fax: (760) 738-3835
After Hours Phone: (760) 738-5533
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 299881
Board Certified: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Phone: (760) 738-5533
Fax: (760) 738-3835
After Hours Phone: (760) 738-5533
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

ROBINSON, COLE
Provider ID: 300171
Board Certified: No
IHP OF SOUTHERN CAL-PHP
160 N DATE ST
ESCONDIDO, CA 92025
Phone: (888) 873-6220
Fax: (888) 873-6220
After Hours Phone: (888) 873-6220
Provider Gender: Male
NPI: 1871799528
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-4PM SA 7AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BALLOUT, REEM

Provider ID: 310193

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DENLINGER, TAMARA

Provider ID: 317053

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: 1699459032

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARGANO-CAMPA, NICOLE

Provider ID: 316689

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

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

Provider ID: 277866

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

JANNESARI, ROYA
Provider ID: 302339
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LINDSEY, SABRINA
Provider ID: 314180
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
NPI: 1164860813
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

NAVARRO, STEVEN
Provider ID: 310223
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (760) 466-1373
After Hours Phone: (760) 520-8100
Provider Gender: Male
NPI: 1013598960
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ODONNELL, NICOLE

Provider ID: 314392

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SOTO MAYA, ANAYELI

Provider ID: 317102

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

WALDRUP, LA RHONDA

Provider ID: 299259

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN

Provider ID: 269203

Board Certified: No

COMMUNITY CARE IPA LLC

488 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (877) 217-8505

Fax: (760) 735-6296

After Hours Phone: (877) 217-8505

Provider Gender: Female

NPI: 1861562498

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 304936
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1811423072
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

ENDOCRINOLOGY METABOLISM DIABETES

REDDY, NAVYA
Provider ID: 302350
Board Certified: No
IHP OF SOUTHERN CAL-PHP
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Female
NPI: 1083069611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

GARA, NAVEEN
Provider ID: 269145
Board Certified: No
COMMUNITY CARE IPA LLC
661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Phone: (760) 690-2800
Fax: (760) 690-2801
After Hours Phone: (760) 690-2800
Provider Gender: Male
NPI: 1942406533
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Telugu
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

GASTROENTEROLOGY

GARA, NAVEEN
Provider ID: 305691
Board Certified: No
COMMUNITY CARE IPA LLC
935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Phone: (760) 690-2800
Fax: (619) 345-4055
After Hours Phone: (760) 690-2800
Provider Gender: Male
NPI: 1942406533
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Telugu
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 268690
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

CHEN, ANDREW
Provider ID: 296830
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8005
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

MALEK, MIKHAIL
Provider ID: 296831
Board Certified: Yes
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1467455212
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 296843
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 296842
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 309248
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SAWHNEY, NAVINDER
Provider ID: 304784
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 320
ESCONDIDO, CA 92029
Phone: (858) 485-0130
Fax: (858) 485-9424
After Hours Phone: (858) 485-0130
Provider Gender: Male
NPI: 1619174133
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 309097
Board Certified: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Phone: (760) 294-0480
Fax: (619) 616-2104
After Hours Phone: (760) 294-0480
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 295845
Board Certified: No
IHP OF SOUTHERN CAL-PHP
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Phone: (760) 294-0480
Fax: (619) 616-2104
After Hours Phone: (760) 294-0480
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296996
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294655
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL
Provider ID: 283707
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 206163
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY
Provider ID: 283801
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
NPI: 1164572632
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 277870
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

HAMILTON, ROSS
Provider ID: 311788
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: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

JINDAL, ANUJA
Provider ID: 277838
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

KIM MCMANUS, OLIVIA
Provider ID: 277873
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

ZIMBRIC, MICHAEL
Provider ID: 277891
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

HOFFMAN, MICHAEL
Provider ID: 310393
Board Certified: No
IHP OF SOUTHERN CAL-PHP
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Phone: (760) 466-9800
Fax: (360) 462-2741
After Hours Phone: (760) 466-9800
Provider Gender: Male
NPI: 1720047707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ADVENTIST MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 285518
Board Certified: No
UCSD MEDICAL GROUP
2125 CITRACADO PKWY STE 210
ESCONDIDO, CA 92029
Phone: (760) 739-2921
Fax: (760) 739-3162
After Hours Phone: (760) 739-2921
Provider Gender: Female
NPI: 1396904876
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 277883
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 277877
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 297014
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 205895
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 277824
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 277833
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

MUNDAE, RUSDEEP
Provider ID: 316981
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: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 277869
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 311889
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

DUONG, NGHI
Provider ID: 314753
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 307411
Board Certified: No
COMMUNITY CARE IPA LLC
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 307410
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

ZAIDI, NOORINA
Provider ID: 310608
Board Certified: No
IHP OF SOUTHERN CAL-PHP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Female
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 277537
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 310282
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG
Provider ID: 277853
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: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

JIANG, WEN
Provider ID: 277860
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1659305753
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 206110
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1124230909
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 297038
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
NPI: 1508250747
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN
Provider ID: 311005
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1356796783
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER
Provider ID: 277811
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 277867
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1023329885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 205689
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1023329885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 313256
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 277846
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1376705707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE
Provider ID: 206298
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1417222472
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303783

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL

Provider ID: 311162

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760) 739-1543

Provider Gender: Male

NPI: 1336727791

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 277851

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL
Provider ID: 295670
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1134681265
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE
Provider ID: 277872
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: 1477626513
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY
Provider ID: 311934
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1992202964
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH
Provider ID: 302802
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1407299787
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205812
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 289412
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311398
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1588846380
Provider English Spoken: Y
Provider Language(s) Spoken: German, Hindi, Marathi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301643
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 310621
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1063916633
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

LEVY, AVIYA
Provider ID: 310781
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1144726936
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

BENDER STERN, JULIA
Provider ID: 311586
Board Certified: No
IHP OF SOUTHERN CAL-PHP
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
Phone: (760) 466-9800
Fax: (360) 462-2741
After Hours Phone: (760) 466-9800
Provider Gender: Female
NPI: 1568044691
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY
Provider ID: 295277
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1955 CITRACADO PKWY STE 203
ESCONDIDO, CA 92029
Phone: (760) 738-5533
Fax: (909) 204-7863
After Hours Phone: (760) 738-5533
Provider Gender: Male
NPI: 1407052459
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE
Provider ID: 275660
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY
ESCONDIDO, CA 92025
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male

NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ABSI, CHRISTIAN
Provider ID: 311840
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (833) 867-4642
Fax: (360) 462-2748
After Hours Phone: (833) 867-4642
Provider Gender: Male
NPI: 1316652779
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CAMPBELL, PATRICK
Provider ID: 310816
Board Certified: No
IHP OF SOUTHERN CAL-PHP
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
Provider Gender: Male
NPI: 1538917125
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CHENG, ISABEL
Provider ID: 317114
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FONTANILLA, ROBERT
Provider ID: 315343
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER
Provider ID: 301993
Board Certified: No
IHP OF SOUTHERN CAL-PHP
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Male
NPI: 1982365490
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HENNESSY, JAMES
Provider ID: 315245
Board Certified: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Provider Gender: Male
NPI: 1801525241
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NCHOTU, SUCCESS
Provider ID: 311537
Board Certified: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Provider Gender: Male
NPI: 1073157210
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NIAKAMAL, EVAN
Provider ID: 291250
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
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 302456
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

WALSH, JOHN
Provider ID: 301971
Board Certified: No
IHP OF SOUTHERN CAL-PHP
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Male
NPI: 1386893089
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ZATT, DANIELLE
Provider ID: 314765
Board Certified: No
IHP OF SOUTHERN CAL-PHP
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Provider Gender: Female
NPI: 1578199527
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PODIATRIST

ALGHURAIBI, OHOUD
Provider ID: 295998
Board Certified: No
IHP OF SOUTHERN CAL-PHP
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 462-2745
After Hours Phone: (760) 520-8100
Provider Gender: Female
NPI: 1669842357
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PODIATRIST

READ, TRENTON
Provider ID: 300882
Board Certified: No
IHP OF SOUTHERN CAL-PHP
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Phone: (760) 480-1189
Fax: (858) 485-1515
After Hours Phone: (760) 480-1189
Provider Gender: Male
NPI: 1952963431
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PODIATRIST

READ, TRENTON
Provider ID: 296654
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Phone: (760) 480-1189
Fax: (858) 485-1515
After Hours Phone: (760) 480-1189
Provider Gender: Male
NPI: 1952963431
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PSYCHOLOGIST

MORAN, CHRISTINA
Provider ID: 314549
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: 1063661577
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TEETER-WITT, ALYSSA
Provider ID: 290891
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TEETER-WITT, ALYSSA
Provider ID: 290779
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PULMONARY DISEASES

QUAN, MICHELE GRACE
Provider ID: 287097
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 221090
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
Provider ID: 314063
Board Certified: 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
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 283206
Board Certified: No
COMMUNITY CARE IPA LLC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

MCGEE, JACQUELINE
Provider ID: 252473
Board Certified: No
COMMUNITY CARE IPA LLC
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Phone: (760) 233-9655
Fax: (760) 233-9648
After Hours Phone: (760) 233-9655
Provider Gender: Female
NPI: 1194217133
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 8\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-6PM
Website: N/A
IPA: Community Care IPA LLC

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307881
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304606
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

GROVE, JAY
Provider ID: 245226
Board Certified: No
COMMUNITY CARE IPA LLC
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (760) 300-3647
Fax: (760) 482-1316
After Hours Phone: (760) 300-3647
Provider Gender: Male
NPI: 1912971334
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY GENERAL VASCULAR

BORJON, AGUSTIN
Provider ID: 315992
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 300
ESCONDIDO, CA 92029
Phone: (760) 739-7666
Fax: (760) 739-7633
After Hours Phone: (760) 739-7666
Provider Gender: Male
NPI: 1124472311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

SURGERY NEUROLOGICAL

HATEFI, DUSTIN

Provider ID: 310032

Board Certified: 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, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN

Provider ID: 316058

Board Certified: No

UCSD MEDICAL GROUP

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1487107454

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 277831

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 480-8770

Fax: (760) 480-8811

After Hours Phone: (760) 480-8770

Provider Gender: Male

NPI: 1013048412

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

KNUTSON, THOMAS

Provider ID: 296851

Board Certified: No

COMMUNITY CARE IPA LLC

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 743-4789

Fax: (760) 743-4779

After Hours Phone: (760)

743-4789
Provider Gender: Male
NPI: 1962409938
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

SURGERY ORTHOPEDIC

SHIEH, ALVIN
Provider ID: 316211
Board Certified: No
COMMUNITY CARE IPA LLC
2130 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760) 743-4789
Provider Gender: Male
NPI: 1316322100
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 206130
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 310989
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

FALLBROOK

CERTIFIED NURSE PRACTITIONER

GUIDI, CASEY
Provider ID: 296010
Board Certified: 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: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 298086
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 299775
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

D. شبكة مقدمي الخدمات من الأطباء المتخصصين

PRACTITIONER

KIRKLAND, STEPHANIE
Provider ID: 314956
Board Certified: No
IHP OF SOUTHERN CAL-PHP
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

STOJANOVSKA, JOVANA
Provider ID: 301367
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

KIRKLAND, STEPHANIE
Provider ID: 317326
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1083813661
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRICS

ROBINSON, DAISY
Provider ID: 298311
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

HEMET

PHYSICIANS ASSISTANT

SMITH, KELLI
Provider ID: 272953
Board Certified: No
UCSD MEDICAL GROUP
3853 W STETSON AVE STE 200
HEMET, CA 92545
Phone: (951) 225-6802
After Hours Phone: (951) 225-6802
Provider Gender: Female
NPI: 1841771664
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE
Provider ID: 315214
Board Certified: No
IHP OF SOUTHERN CAL-PHP
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1831557024
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, STEPHANIE
Provider ID: 301310
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LUNA, ABIGAIL
Provider ID: 315817
Board Certified: No
IHP OF SOUTHERN CAL-PHP
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1366299315
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OCONNELL, STEFANY
Provider ID: 296845
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OPARA, CHINYERE
Provider ID: 317117
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RAJIV, RENUKA
Provider ID: 315857
Board Certified: No
IHP OF SOUTHERN CAL-PHP
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1821819301
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

WOOLSEY, EMILY

Provider ID: 316866

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

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

CAMPOS, PRISCILLA

Provider ID: 316513

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: 1508217399

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified: No

IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (877) 673-1361

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

PASCUA, RYAN

Provider ID: 312025

Board Certified: No

IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (877) 673-1361

After Hours Phone: (619) 429-3733

Provider Gender: Male

NPI: 1972064269

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HSIEH, STEPHANIE

Provider ID: 312496

Board Certified: No

IHP OF SOUTHERN CAL-PHP

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (877) 673-1361

After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1720868045

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304530

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

Accessibility: CONTACT PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHUNG, PETER

Provider ID: 314476

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: 1023837887

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 301973
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 299890
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 287101
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-6PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305016

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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305015
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 301995
Board Certified: No
IHP OF SOUTHERN CAL-PHP
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 286783
Board Certified: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

PASCUAL, CHRISTOPHER
Provider ID: 314204
Board Certified: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1093328064
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 301109
Board Certified: No
IHP OF SOUTHERN CAL-PHP
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 7AM-7PM
TU 7AM-12PM
W-TH 7AM-7PM
F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH
Provider ID: 301429
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: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH
Provider ID: 298365
Board Certified: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

VAISMAN, SAMANTHA
Provider ID: 311835
Board Certified: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457022071
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VERISSIMO, TAYLOR
Provider ID: 310202
Board Certified: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1124871629
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 301531
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: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

LA JOLLA

ADVANCED HEART FAILURE AND TRANSPLANT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CARDIOLOGY

ADLER, ERIC

Provider ID: 316009

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

SILVA ENCISO, JORGE

Provider ID: 316137

Board Certified: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1639404031

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

TRAN, HAO

Provider ID: 316169

Board Certified: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891997078

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

UREY, MARCUS

Provider ID: 316157

Board Certified: No

UCSD MEDICAL GROUP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1972820058
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 316013
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

AL AZZAWI, SARAH
Provider ID: 312974
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ALEXANDER, BRENTON
Provider ID: 242302
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1811366644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA
Provider ID: 300067
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265938724
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BHATIA, KARISHMA
Provider ID: 313007
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, ELSIE
Provider ID: 313509
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, SPENCER
Provider ID: 317388
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BUI, AN
Provider ID: 316092
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: 1467080341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CABANISS, SCOTT
Provider ID: 311437
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1821626714
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW
Provider ID: 310045
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205966264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN
Provider ID: 311462
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CURRAN, BRIAN
Provider ID: 239003
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

DARWISH, ALEX
Provider ID: 313026
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FEJLEH, ASHLEY
Provider ID: 269503
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FUNDINGSLAND, BRENT
Provider ID: 280469
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GARRETT, RILEY
Provider ID: 313741
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE
Provider ID: 311502
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

HOSALKAR, HETAL
Provider ID: 243370
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 241736
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KAWASAKI, MEGAN
Provider ID: 313584
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KIM, ELIZABETH
Provider ID: 313003
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KROL, CAITLIN
Provider ID: 313047
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MALONEY, IAN
Provider ID: 313015
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEASER, JACQUELINE
Provider ID: 312977
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEYER, MEGAN
Provider ID: 239608
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720473044
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL
Provider ID: 311125
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679584791
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

NGUYEN, QUOC SY
Provider ID: 242189
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

OKAMOTO, VINCENT
Provider ID: 245952
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

OSWALD, JESSICA
Provider ID: 239601
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SHAW, SUSANNA
Provider ID: 255317
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SNOW, ERICA

Provider ID: 312988

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243295

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286570

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246750

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699057885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, CORONA REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TSUDA, PAIGE
Provider ID: 271683
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003261595
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TULLY, JEFFREY
Provider ID: 283690
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871912493
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TZENG, ERIC
Provider ID: 284578
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

WANG, MICHELLE
Provider ID: 286139
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

YOUNAN, LAWRENCE
Provider ID: 240871
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ZAERPOOR, DARA
Provider ID: 313028
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN
Provider ID: 280540
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL
Provider ID: 243554
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1700296514
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

DEJULIO, PAUL
Provider ID: 316041
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871851154
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON
Provider ID: 316138
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346516069
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH

Provider ID: 316050
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

BIRS, ANTOINETTE
Provider ID: 313049
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW
Provider ID: 316171
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

DAMANI, SAMIR
Provider ID: 310637
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
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

DURAN, EDWARD
Provider ID: 316127
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

GUPTA, TRIPTI
Provider ID: 313715
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

KEEN, WILLIAM
Provider ID: 291303
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 316012
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 214021
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 316061
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 312912
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 17411
LA JOLLA, CA 92037
Phone: (858) 657-8530
Fax: (858) 657-8814
After Hours Phone: (858) 657-8530
Provider Gender: Female
NPI: 1891958773
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS
Provider ID: 316170

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS
Provider ID: 224864
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY
Provider ID: 300000
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

TAUB, PAM
Provider ID: 316073
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 316082
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 312909
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 304136
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 304141
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 304140
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104129485
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 311064
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 311065
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 311066
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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 312191
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BOUTELLE, AMY
Provider ID: 243485
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BRADY, KATELYN
Provider ID: 209017
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA
Provider ID: 243717
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER
Provider ID: 241030
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA
Provider ID: 299931
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
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA
Provider ID: 299932
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
- *Accessibility: CONTACT PROVIDER*

Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE
Provider ID: 279834
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER
Provider ID: 253691
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER
Provider ID: 238922
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 300052
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528632742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 245579
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 245580
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE
Provider ID: 286376
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GIOVANNETTI, ERIN
Provider ID: 276002
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013317767
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299469
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299470
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299465
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1528578713
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299464
Board Certified: No
UCSD MEDICAL GROUP
- 9400 CAMPUS POINT DR
  LA JOLLA, CA 92093
- *Phone: (800) 926-8273*

Fax: (888) 539-8781
- *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1528578713
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOSHEN, KIRSTEN
Provider ID: 317190
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: CONTACT PROVIDER*
- *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: 314005
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: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*
- *Website: N/A*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HARKNESS, RUMIKO

Provider ID: 208840

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

IORIO, ALANNA

Provider ID: 317362

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

IYER, VICTORIA

Provider ID: 265624

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: Female

NPI: 1871738864

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA

Provider ID: 275564

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396371431

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA
Provider ID: 282070
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093895047
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301604
Board Certified: No
IHP OF SOUTHERN CAL-PHP
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299650
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299651
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299646
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299645
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA
Provider ID: 282231
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUNRO, KRISTA
Provider ID: 316143
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN
Provider ID: 311126
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN
Provider ID: 311127
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MUUS, SUSAN
Provider ID: 311128
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1295583870
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NACOSTE, LAKEISHA
Provider ID: 272935
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-5210
After Hours Phone: (858) 822-5210
Provider Gender: Female
NPI: 1194139634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PATEL, PRIYA
Provider ID: 316036
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1649008772
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

PATEL, PRIYA
Provider ID: 316035
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAULSON, KERRY
Provider ID: 201269
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RALEIGH, DEBORAH
Provider ID: 215016
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689006876
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROCHE, CHELSEA
Provider ID: 270706
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1063040384
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL
Provider ID: 312992
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

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE
Provider ID: 281855
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA
Provider ID: 210795
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TONG, KIM
Provider ID: 313527
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 307673
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

926-8273
Provider Gender: Female
NPI: 1033717194
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSF MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 307671
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 307670
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TRUJILLO, DALE
Provider ID: 278428
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA

Provider ID: 307658

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299942

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256375

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA

Provider ID: 312689

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BURROWS, TERENCE
Provider ID: 256695
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: 1023194560
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL
Provider ID: 316037
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1942975313
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CONRAD, SIMON
Provider ID: 316111
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952970014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DAVENPORT, LARIS
Provider ID: 316177
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 316025
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN
Provider ID: 280553
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 311602
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538900154
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FERRITER, STACY
Provider ID: 265296
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780725556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN
Provider ID: 217366
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1427419944
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA
Provider ID: 299906
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083254205
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL
Provider ID: 316129
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1053971903
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LANDON
Provider ID: 316172
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON
Provider ID: 311519
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE
Provider ID: 291403
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: 1487213500
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT
Provider ID: 278004
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982133591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SCOTT, TIFFANY
Provider ID: 312871
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TOCCO, JESSICA
Provider ID: 312886
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN
Provider ID: 316067
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL
Provider ID: 313051
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WOODIN, KAREN
Provider ID: 310373
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 301713
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 210017
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
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA
Provider ID: 210051
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE

Provider ID: 210040

Board Certified: 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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210056

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858) 657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210057

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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301046

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

DANG, TIMOTHY
Provider ID: 312866
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

WONG, HENRY
Provider ID: 313608
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

AMANN, CHRISTOPHER
Provider ID: 270914
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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

AUSTIN, ANDREA
Provider ID: 269292
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811289093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: 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: 271131
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 270335
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BLACK, NICHOLAS
Provider ID: 284415
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

NPI: 1154852689
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 313569
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669962270
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 313567
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669962270
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 287429
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 287427
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHIN, BRIAN
Provider ID: 313571
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COOK, LEANNE
Provider ID: 313634
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1053948687
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COOK, LEANNE
Provider ID: 313632
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1053948687
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN
Provider ID: 316203
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1669762472
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN
Provider ID: 316202
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COYNE, CHRISTOPHER
Provider ID: 315897
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

EAGLE, SONJA
Provider ID: 311504
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNA
Provider ID: 300006
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: PIONEERS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNA
Provider ID: 301710
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: PIONEERS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 240023
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205214442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KRESHAK, ALLYSON
Provider ID: 257564
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194758219
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

EMERGENCY MEDICINE

KRYSHTAFOVYCH, SOLOMIYA
Provider ID: 313021
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801425244
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 283844
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 283846
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598295925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAFREE, ANDREW
Provider ID: 313674
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 316015
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: 1669730925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 316014
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAVEMAN, EVAN
Provider ID: 313670
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAVEMAN, EVAN
Provider ID: 313671
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 255938
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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 255937

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 313018
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 283150
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIPPI, MATTHEW
Provider ID: 311493
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH
Provider ID: 316150
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033140843
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH
Provider ID: 316149
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033140843
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MEDAK, ANTHONY
Provider ID: 316011
Board Certified: 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: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN
Provider ID: 239796
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY
Provider ID: 285609
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY
Provider ID: 285608
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

RUDOLF, FRANCES
Provider ID: 240160
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SABHA, MAHMOUD
Provider ID: 240450
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: CONTACT PROVIDER
Hours: SU 8AM-8PM M-F 8AM-5PM SA 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SAMHA, LEEN
Provider ID: 313011
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (858) 554-1212
Fax: (888) 539-8781
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1992334825
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SAMHA, LEEN
Provider ID: 313009
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 554-1212
Fax: (888) 539-8781
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1992334825
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SANDIFORD, PATRICK
Provider ID: 312861
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SANDIFORD, PATRICK
Provider ID: 312860
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1700151917
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 316156
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1467495770
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 316155
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1467495770
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SEGAL, LAUREN
Provider ID: 313709
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 315888
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 316163
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447791843
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 283135
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447791843
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SHISHLOV, KIRILL
Provider ID: 313657
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SLOANE, CHRISTIAN
Provider ID: 315891
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 313728
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 300008
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871099333
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SNYDER, BRIAN
Provider ID: 316146
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 315895
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 315883
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 315884

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TORRES, ERICK
Provider ID: 313619
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WARDI, GABRIEL
Provider ID: 316079
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720346083
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WAYMENT, ANDREW
Provider ID: 313530
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013593839
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: BEAR VALLEY COMM HOSP, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WINKLER, GARRET
Provider ID: 271416
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN
Provider ID: 269938
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN
Provider ID: 269937
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 299985

Board Certified: 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

DECAMPS, SCARLETT

Provider ID: 311512

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY
METABOLISM DIABETES

KULASA, KRISTEN
Provider ID: 255623
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI
Provider ID: 287778
Board Certified: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY
METABOLISM DIABETES

PETTUS, JEREMY
Provider ID: 303286
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225234982
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY
METABOLISM DIABETES

PHATAK, SONAL
Provider ID: 316051
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932291119

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

PHATAK, SONAL
Provider ID: 316052
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932291119
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA
Provider ID: 256092
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518163799
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 207166
Board Certified: No
UCSD MEDICAL GROUP
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 207165
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR

LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
Provider ID: 300056
Board Certified: Yes
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1114366192
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 256953
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1750339446
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 256954
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750339446
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272836

Board Certified: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-2347

Fax: (858) 657-7259

After Hours Phone: (619) 543-2347

Provider Gender: Male

NPI: 1861626814

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

BRANCH, LAUREL

Provider ID: 313514

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

BRANCH, LAUREL

Provider ID: 313515

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN

Provider ID: 311110

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN
Provider ID: 311108
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 270448
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 270449
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA
Provider ID: 316547
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316548
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

FEJLEH, MOHAMMAD
Provider ID: 271043
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: Female
NPI: 1205240959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

FEJLEH, MOHAMMAD
Provider ID: 271042
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205240959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KRAUSE, AMANDA
Provider ID: 313629
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KRAUSE, AMANDA
Provider ID: 313630
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 313477
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 313478
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 313613
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 313614
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 283898
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 283897
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

TSAI, MATTHEW
Provider ID: 252369
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: 1285051177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

TSAI, MATTHEW
Provider ID: 252368
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 300023
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 300025
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 282165
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: 1144486929
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, CORONA REGIONAL MED CTR,

CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCI HEALTH-FOUNTAIN VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM
Provider ID: 313022
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS
Provider ID: 246594
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHANG, JEREMY
Provider ID: 314055
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI
Provider ID: 303057
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI
Provider ID: 303058
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOI, SHARON
Provider ID: 316121
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOUEIRI, MICHEL
Provider ID: 317408
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HAMDAN, AYAD
Provider ID: 241429
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HELSTEN, TERESA
Provider ID: 317379
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HELSTEN, TERESA
Provider ID: 317380
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
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN
Provider ID: 202662
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: SU-SA 8AM-5PM*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN
Provider ID: 202664
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN
Provider ID: 202663
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982995809
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

PARK, SOO
Provider ID: 257202
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1821351198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE
Provider ID: 215010
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700120102
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

STEWART, TYLER
Provider ID: 243920
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699110676
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

VU, PETER
Provider ID: 272717
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU
Provider ID: 247584
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689633729
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU
Provider ID: 275792

Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689633729
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 241954
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023301991
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 241952
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR STE 2C
LA JOLLA, CA 92037
Phone: (619) 543-5415
After Hours Phone: (619) 543-5415
Provider Gender: Male
NPI: 1023301991
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 245574
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 CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

WINTERS, KATHRYN
Provider ID: 317442
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

WINTERS, KATHRYN
Provider ID: 317440
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 275069
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 275070

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: 1033128376
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

FIRESTEIN, CATHERINE
Provider ID: 275388
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

HAMMOND, CHARLES
Provider ID: 278589
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

LE ROUX, MICHELLE
Provider ID: 311568
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144808353
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA
Provider ID: 299947
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

INFECTIOUS DISEASE

TANG, MICHAEL
Provider ID: 300063
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982018545
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BARRIOLA RUBARTH, RODRIGO
Provider ID: 311571
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1336729979
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA
Provider ID: 273984
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
NPI: 1801184973
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA
Provider ID: 273985
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801184973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CHENG, GEORGE
Provider ID: 247640
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1316174568
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA
Provider ID: 286669
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FEUVRIER, ARIANA
Provider ID: 316160

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FOX, SUTTON
Provider ID: 313473
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

HOGARTH, MICHAEL
Provider ID: 214385
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

IBARRA, ALLISON
Provider ID: 312686
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

IVANOV, MARGARET
Provider ID: 272876
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

JABBOUR, MOUSSA
Provider ID: 256658
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KATZ, YISRAEL
Provider ID: 272937
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA
Provider ID: 274002
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA
Provider ID: 274004
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS
Provider ID: 238623
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS
Provider ID: 238624
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL
Provider ID: 274409
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MAJITHIA, AMIT
Provider ID: 255881
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MARINO, NIKOLAS
Provider ID: 313524
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NGUYEN, MICHELLE
Provider ID: 311485
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOKES, BRANDON
Provider ID: 287581

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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOVIKOV, YEVGENY
Provider ID: 313731
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

POTOK, OLIVIA
Provider ID: 272707
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

QURESHY, ZOYA
Provider ID: 317383
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SAHA, SRISHTI

Provider ID: 316142
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 273963
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 273964
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SIRIPHAND, CHRISTOPHER
Provider ID: 311446
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SMITH, CHELSEY

Provider ID: 239921

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274470

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259536

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

WONG, JUSTIN

Provider ID: 313598

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YADLAPATI, RENA
Provider ID: 238587
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548597784
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YADLAPATI, RENA
Provider ID: 238586
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548597784
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 283025
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346636453
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

ZHANG, SHERRY
Provider ID: 272658
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1588198147
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ALOTAIBI, MONA
Provider ID: 271480
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174933915
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BARNES, LAURA
Provider ID: 312183
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 284703
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800) 926-5273
Provider Gender: Female
NPI: 1750317251
Provider English Spoken: Y
Provider Language(s)

Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

DEWOLF, SEAN
Provider ID: 311454
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1518312230
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KINDRED HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

HEPOKOSKI, MARK
Provider ID: 311547
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

IBRAHIM, ISLAM
Provider ID: 311488
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7125
Fax: (858) 822-5338
After Hours Phone: (858) 657-7125
Provider Gender: Male
NPI: 1962586917
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, LONG BEACH MEMORIAL MED CTR, TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

JOHN, MIRA
Provider ID: 311592
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013448588
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

KAMDAR, BIREN
Provider ID: 311451
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (855) 355-5864
After Hours Phone: (855) 355-5864
Provider Gender: Male
NPI: 1528115417
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SANTA MONICA UCLA MED CTR, RONALD REAGAN UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LI, JINGHONG
Provider ID: 316097
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 311560
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1699979591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271468
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992141428
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PAGE, BRADY
Provider ID: 313676
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1528557550
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 271938
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 316063

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: 1861623506

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275993

Board Certified: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (858) 657-8530

After Hours Phone: (858) 657-8530

Provider Gender: Male

NPI: 1861623506

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ANG, LAWRENCE

Provider ID: 316098

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN

Provider ID: 310077

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300062

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: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303097

Board Certified: No

IHP OF SOUTHERN CAL-PHP

9850 GENESEE AVE STE 650
LA JOLLA, CA 92037

Phone: (858) 800-2480

Fax: (858) 216-1908

After Hours Phone: (858) 800-2480

Provider Gender: Male

NPI: 1457379372

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE

Provider ID: 311130

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 311578
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, GARY
Provider ID: 313302
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

REEVES, RYAN
Provider ID: 316081
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

SORIA JIMENEZ, CESAR
Provider ID: 311092

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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TAUB, PAM
Provider ID: 277681
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TAUB, PAM
Provider ID: 277682
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

TORRES BARBA, DAVID
Provider ID: 316197
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 210604
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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS
Provider ID: 209561
Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871767384
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, EISENHOWER MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 300009
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1245627421
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317399
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317398
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 208639
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 240599
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 312715
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265686794
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS
Provider ID: 209383
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD
Provider ID: 209252
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497713846
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 283287
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-5800
After Hours Phone: (858) 249-5800
Provider Gender: Female
NPI: 1528454188
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

DEL ROSARIO, PAMELA
Provider ID: 295001
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA
Provider ID: 294252
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Female
NPI: 1245617489
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 299893
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 297977
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9300 CAMPUS POINT DR STE 8
LA JOLLA, CA 92037
Phone: (858) 657-7000
Fax: (858) 249-5839
After Hours Phone: (858) 657-7000
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301824
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

PHAM, BETTY
Provider ID: 310311
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: Female
NPI: 1790217750
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO
Provider ID: 206170
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 303908
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9300 CAMPUS POINT DR FL 8
LA JOLLA, CA 92037
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 303907
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEPHROLOGY

RIFKIN, DENA
Provider ID: 311022
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

RIFKIN, DENA
Provider ID: 311023
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SANCHEZ, AMBER
Provider ID: 311155
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: 1700963907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SANCHEZ, AMBER
Provider ID: 311156
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700963907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SANCHEZ, AMBER
Provider ID: 311157
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700963907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SINGH, PRABHLEEN
Provider ID: 311034
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: 1235207234
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEPHROLOGY

SINGH, PRABHLEEN
Provider ID: 311035
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235207234
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GHOLIPOUR, TAHA
Provider ID: 311497
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

HAMILTON, ROSS
Provider ID: 311789
Board Certified: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Phone: (760) 631-3000
Fax: (760) 631-3007
After Hours Phone: (760) 631-3000
Provider Gender: Male
NPI: 1538587852
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

ILICETO, ALESSANDRO
Provider ID: 313505
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE
Provider ID: 246701
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 311187
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA
Provider ID: 311522
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID
Provider ID: 246264
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

MAHTA, ALI
Provider ID: 314333
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI
Provider ID: 284371
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI
Provider ID: 284369
Board Certified: No
UCSD MEDICAL GROUP
9500 GILMAN DR STE 2069

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

LA JOLLA, CA 92093
Phone: (858) 822-5881
Fax: (888) 539-8781
After Hours Phone: (858) 822-5881
Provider Gender: Male
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SCHULTE, JESSICA
Provider ID: 284819
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 311471
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

TECOMA, EVELYN
Provider ID: 311534
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

UNG, HOAMENG
Provider ID: 311434
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

WU, VICTORIA
Provider ID: 313038
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 314374
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 314375
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311194
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311195
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291324
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291323
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291335
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: 1730507567
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291334
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 311104
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 311106
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 313592
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 278918
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 313594
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 278916
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 286230
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 200964
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 303062
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 311117
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 311118
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA
Provider ID: 285740
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA
Provider ID: 285739
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA
Provider ID: 299920
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA
Provider ID: 313547
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: 1548897770
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PENALOSA, PATRICK
Provider ID: 313494
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PENALOSA, PATRICK
Provider ID: 313493
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

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE
Provider ID: 284295
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: 1295263861
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE
Provider ID: 284296
Board Certified: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 340
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295263861
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE
Provider ID: 284297
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: 1295263861
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285175
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285173
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: 1689013468
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

FARBER, EMILY
Provider ID: 258537
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

LIPARI, RACHEL
Provider ID: 311102
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR
Provider ID: 288724
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

PARKER, LESLIE
Provider ID: 311354
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

SOROKIN, LISA
Provider ID: 258362
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

ALLEN, RACHAEL
Provider ID: 315302
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: 1801275391
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787

Board Certified: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (888) 539-8781

After Hours Phone: (858) 534-6290

Provider Gender: Female

NPI: 1912325184

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-5PM SA 7:45AM-2PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313680

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1568995397

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313682

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313683

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH

Provider ID: 313684

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 313495
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 313497
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 313498
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 313717
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 313718
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 313692
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 313693
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 215055
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 311100
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174152961
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 311101
Board Certified: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174152961
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 313537
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 313538
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
Accessibility: CONTACT PROVIDER
Website: N/A

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IPA: UCSD Medical Group

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299965

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL

Provider ID: 313580

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL

Provider ID: 313581

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

DUONG, NGHI

Provider ID: 314751

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

HOO, PAMELA
Provider ID: 269621
Board Certified: No
COMMUNITY CARE IPA LLC
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 822-4438
After Hours Phone: (858) 534-6290
Provider Gender: Female
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

HOO, PAMELA
Provider ID: 316410
Board Certified: No
COMMUNITY CARE IPA LLC
9415 CAMPUS POINT DR
STE 1
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 822-4438
After Hours Phone: (858) 534-6290
Provider Gender: Female
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 299914
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 299915
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

KIM, PHILIP
Provider ID: 287909
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

MCCLEAN, ESMERALDA
Provider ID: 269907
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

VO, ANDREW
Provider ID: 304148
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: 1790291565
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

VO, ANDREW
Provider ID: 201311
Board Certified: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (858) 534-6290
After Hours Phone: (858) 534-6290
Provider Gender: Male
NPI: 1790291565
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 301681
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 301682
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 258078
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299458
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299463
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299460
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299459
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299585
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299581
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299580
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299584
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299585
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299564
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299570
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299565
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299566
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299562
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
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299563
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299558
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299557
Board Certified: Yes
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298398
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 272958
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR STE LLA
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298395
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: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298394
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: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 299578
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 299574
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 299573
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299577
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 299517
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 299513
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 299512
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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299516

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301051

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299448

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299442

Board Certified: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 299444
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 299447
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 294828
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9350 CAMPUS POINT DR
LA JOLLA, CA 92037

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (858) 857-8590
After Hours Phone: (858) 857-8590
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 299594
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 299589
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 299588
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299593

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: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

PEREZ, ANGEL

Provider ID: 313031

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299510

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299506

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 299505
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 299504
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-6197
After Hours Phone: (858) 822-6197
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 299643
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 299644
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 299638
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 299640
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299616
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: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299611
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299613
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299612
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 298415
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 298416
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 242138
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 298411
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

FADARE, OLUWOLE
Provider ID: 275706
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

HANSEN, LAWRENCE
Provider ID: 275768
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA
Provider ID: 275889
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: 1629163100
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PATEL, CHARMI
Provider ID: 259112
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1730389362
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Gujarati, Hindi*

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD
Provider ID: 275815
Board Certified: No
UCSD MEDICAL GROUP
- 9444 MEDICAL CENTER DR LA JOLLA, CA 92037
- *Phone: (800) 926-8273*

Fax: (888) 539-8781
- *After Hours Phone: (800) 926-8273*

Provider Gender: Male
NPI: 1275084295
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO
Provider ID: 201304
Board Certified: No
UCSD MEDICAL GROUP
- 9300 CAMPUS POINT DR LA JOLLA, CA 92037
- *Phone: (800) 926-8273*

Fax: (888) 539-8781
- *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1043571045
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO
Provider ID: 275750
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH
Provider ID: 275757
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
Provider ID: 275722
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: 1184674145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 275746
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE
Provider ID: 275816
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE
Provider ID: 247149
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING
Provider ID: 243966
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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING
Provider ID: 243965
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES
Provider ID: 275827
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED
Provider ID: 275782
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
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA
Provider ID: 275840
Board Certified: No
UCSD MEDICAL GROUP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174757181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE
Provider ID: 275814
Board Certified: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700334802
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE
Provider ID: 203172
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700334802
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZHANG, HAIYAN
Provider ID: 203176
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1457617110
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ZHANG, HAIYAN
Provider ID: 275841
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL
Provider ID: 275735
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 246900
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 315886
Board Certified: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (858) 249-6800
Fax: (858) 404-9226
After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 312986
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1689036436
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY
Provider ID: 284764
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ALLERS, JENNA
Provider ID: 301037
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730605486
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ARMEEN, GARY
Provider ID: 247036
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BOYD, LISA
Provider ID: 217650
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE
Provider ID: 255557
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): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CHERRY, REENA
Provider ID: 243349
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689729683
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CHERRY, REENA
Provider ID: 269494
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689729683
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

COOKISH, DAVID
Provider ID: 286591
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1215338884
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CRIPE, TAYLOR
Provider ID: 210983
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

DEMASCO, MICHAEL
Provider ID: 278969
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

DEMOOR, PATRICIA
Provider ID: 212879
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
Provider ID: 311551
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 247205
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287135
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: 1861624181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287136
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861624181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER
Provider ID: 309997
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265081871
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER
Provider ID: 309996
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LIN, JOYCE
Provider ID: 265147
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
Provider Language(s) Spoken: Taiwanese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LIN, JOYCE
Provider ID: 265146
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 888-9268
Fax: (888) 539-8781
After Hours Phone: (800) 888-9268
Provider Gender: Female
NPI: 1427681022
Provider English Spoken: Y
Provider Language(s) Spoken: Taiwanese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUONG, TRAN
Provider ID: 279014
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUONG, TRAN
Provider ID: 279015
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LUU, JACKIE
Provider ID: 316181
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 305025
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 305024
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 305027
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH
Provider ID: 280612
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MERRILL, COREY
Provider ID: 258039
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: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

OKADA, MICHELLE
Provider ID: 278017
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

OKADA, MICHELLE
Provider ID: 278016
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 293440
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-7967
Fax: (858) 822-6395
After Hours Phone: (858) 822-7967
Provider Gender: Male
NPI: 1386791028
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 293442
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 283583
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 283584
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 253254
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 253255
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ROMO, JORGE
Provider ID: 309983
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SANCHEZ, MICHAEL
Provider ID: 206907
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SERHAN, STEPHANIE
Provider ID: 312858
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR
Provider ID: 313666
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1821573718
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR
Provider ID: 313667
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR
Provider ID: 313668
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 311090
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 312696
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1457718843
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 312697
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1457718843
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 299601
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 299602
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 299596
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 278202
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
NPI: 1932494499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BOOTH, CHRISTOPHER
Provider ID: 209118
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BOOTH, CHRISTOPHER
Provider ID: 209117
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

CHESHER, NICHOLAS
Provider ID: 273812
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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

926-8273
Provider Gender: Male
NPI: 1124539697
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

CRANDAL, BRENT
Provider ID: 291463
Board Certified: No
UCSD MEDICAL GROUP
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Male
NPI: 1588739452
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

DUARTE, KRISTEN
Provider ID: 255480
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
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

DUARTE, KRISTEN
Provider ID: 255479
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

EGAN, KAITLYN
Provider ID: 311171
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

LASSWELL, EVE
Provider ID: 208260
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

MENDEZ, ANDRES
Provider ID: 279058
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

PELHAM, WILLIAM
Provider ID: 307681
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: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

TARLE, STEPHANIE
Provider ID: 303116
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

THOMAS, KELSEY
Provider ID: 311589
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

THOMAS, KELSEY
Provider ID: 310060
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

ZLATAR, ZVINKA
Provider ID: 272712
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 299925
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

CYPRO, ALEXANDER
Provider ID: 313678
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA
Provider ID: 238060
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 313305
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

MCGUIRE, WILLIAM
Provider ID: 299987
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1841684081
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

PEARCE, ALEX
Provider ID: 300054
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265896856
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

GURAM, KRIPA
Provider ID: 316166
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003377391
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

GURAM, KRIPA
Provider ID: 316165
Board Certified: No
UCSD MEDICAL GROUP
3960 HEALTH SCIENCES

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003377391
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

HOPPER, AUSTIN
Provider ID: 313012
Board Certified: No
UCSD MEDICAL GROUP
3960 HEALTH SCIENCES DR
LA JOLLA, CA 92037
Phone: (858) 554-1212
Fax: (888) 539-8781
After Hours Phone: (858) 554-1212
Provider Gender: Male
NPI: 1306308721
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

HOPPER, AUSTIN
Provider ID: 313013
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 554-1212
Fax: (888) 539-8781
After Hours Phone: (858) 554-1212
Provider Gender: Male
NPI: 1306308721
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

LUI, ASONA
Provider ID: 311439
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104487446
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

LUI, ASONA
Provider ID: 311440
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
Provider ID: 311198
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, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
Provider ID: 311086
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY
Provider ID: 269319
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BISSET, LOGAN

Provider ID: 311145
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 313486
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 313487
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BONE, SAMUEL
Provider ID: 311167
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, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BRANCH, CODY
Provider ID: 283676
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851770622
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BROWN, TERESA
Provider ID: 311081
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: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE
Provider ID: 311136
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548249956
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Eisenhower Medical Center, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 303056
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1619156635
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN
Provider ID: 283227
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA
Provider ID: 313645
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA
Provider ID: 313646
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 313502
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
Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 313503
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 313576
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 313577
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 299993
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY
Provider ID: 286955
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497721724
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN
Provider ID: 201290
Board Certified: 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: CONTACT PROVIDER
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: 311149
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 311596
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 311597
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY
Provider ID: 271568
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY
Provider ID: 282790
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST
Provider ID: 311122
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HENNEMEYER, CHARLES
Provider ID: 312881
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HENNEMEYER, CHARLES
Provider ID: 312882
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 313602
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 313603

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 299959
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 313589
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 313590
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN
Provider ID: 307767
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN
Provider ID: 312890
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER
Provider ID: 283144
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 313543
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 313544
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1396233565
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 300066
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 283316
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 317474
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 317474
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO

Provider ID: 313777

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

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO

Provider ID: 313778

Board Certified: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1649776915

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL

Provider ID: 313559

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285130906

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL

Provider ID: 313560

Board Certified: 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

Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER
Provider ID: 311170
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, SAN LEANDRO HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 313699
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730685611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 313700
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730685611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 313554
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 313555
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1326542341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROZELL, JOSEPH
Provider ID: 311180
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 299967
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER
Provider ID: 240343
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM
Provider ID: 299950
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 313564
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 313565
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY
Provider ID: 283311
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 313625
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 313626
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN
Provider ID: 303050
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN
Provider ID: 312877
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES
Provider ID: 309704
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 311563
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 311566
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 240406
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY
Provider ID: 268545
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 300069
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 313707
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WELSH, RAYMOND
Provider ID: 314370
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, UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 313640
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 313641
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAMORA, JESUS
Provider ID: 317446
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, Eisenhower Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

NGUYEN, VUONG
Provider ID: 317417
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE
Provider ID: 268249
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BALL, STEPHEN
Provider ID: 311014
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 206533

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 258296
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BOEHMER, ALEXANDRA
Provider ID: 311059
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 246021
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

CHIEN, PEI
Provider ID: 214699
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

CHIEN, PEI
Provider ID: 258324
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

HOUSELY, ALEXIS
Provider ID: 299971
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: 1689321416
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MAROLLA, ALICE
Provider ID: 241145
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477018729

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER
Provider ID: 207559
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER
Provider ID: 258372
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE
Provider ID: 206546
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY
Provider ID: 258442
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY
Provider ID: 258443
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: 1740708478
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN
Provider ID: 200968
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568938413
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN
Provider ID: 258480
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (858) 657-6879
Provider Gender: Male
NPI: 1568938413
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY
Provider ID: 258496
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
NPI: 1689962169
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

YU, AUDRINE
Provider ID: 258481
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
NPI: 1639271208
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN
Provider ID: 288939
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1164979837
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN
Provider ID: 288938
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1164979837
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SPEECH PATHOLOGIST

UNGER, LINDSEY
Provider ID: 265338
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI
Provider ID: 273364
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE
Provider ID: 286388
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 278551
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA
Provider ID: 286371
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: 1801812656
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA
Provider ID: 284408
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144616541
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

POTENZA, BRUCE
Provider ID: 277299
Board Certified: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 543-7200
After Hours Phone: (619) 543-7200
Provider Gender: Male
NPI: 1548281496
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE
Provider ID: 284419
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548604648
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA
Provider ID: 282142
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

BORTZ, PASCAL
Provider ID: 313995
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CLARY, BRYAN
Provider ID: 202568
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982787131
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HOLLANDSWORTH, HANNAH
Provider ID: 310728
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS 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 CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HORGAN, SANTIAGO
Provider ID: 286380
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 471-0755
After Hours Phone: (619) 471-0755
Provider Gender: Male
NPI: 1932297231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 201728
Board Certified: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR

LA JOLLA, CA 92037
Phone: (619) 471-0755
After Hours Phone: (619) 471-0755
Provider Gender: Male
NPI: 1265649966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANTORELLI, JARRETT
Provider ID: 272304
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033529201
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SIMEONE, DIANE
Provider ID: 311176
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL VASCULAR

GAFFEY, ANN
Provider ID: 287012
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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL VASCULAR

HOWE, STEVEN

Provider ID: 206760

Board Certified: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037

Phone: (858) 657-7777

Fax: (858) 657-5058

After Hours Phone: (858) 657-7777

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284935

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284936

Board Certified: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 275678

Board Certified: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR STE 2A
LA JOLLA, CA 92037

Phone: (619) 543-5540

Fax: (619) 287-7663

After Hours Phone: (619) 543-5540

Provider Gender: Male

NPI: 1093730251

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEAUMONT, THOMAS
Provider ID: 214126
Board Certified: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 657-8540
After Hours Phone: (858) 657-8540
Provider Gender: Male
NPI: 1497067573
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 244070
Board Certified: 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, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD
Provider ID: 270282
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1215176839
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
Provider ID: 310034
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790072106
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN
Provider ID: 316059
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487107454
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

KHANNA, ARJUN
Provider ID: 311542
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

KHANNA, ARJUN
Provider ID: 311543
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE

Provider ID: 244149

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299994

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299995

Board Certified: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (619) 543-5540

Fax: (888) 539-8781

After Hours Phone: (619) 543-5540

Provider Gender: Male

NPI: 1710371273

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242005

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242006

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244159

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244133

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN

Provider ID: 313620

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN
Provider ID: 313621
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUKATA, SUSAN
Provider ID: 277947
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK
Provider ID: 244460
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHOI, JIHOON
Provider ID: 284787
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHOI, JIHOON
Provider ID: 284786
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 313518
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 313519
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1972066785
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DIJANIC, CHRISTOPHER
Provider ID: 313480
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DIJANIC, CHRISTOPHER
Provider ID: 313481
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DWIGHT, KATHRYN
Provider ID: 316032
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: 1548797103
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DWIGHT, KATHRYN
Provider ID: 316033
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GEORGE, JOSE
Provider ID: 313605
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GEORGE, JOSE
Provider ID: 313606
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK
Provider ID: 284793
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK
Provider ID: 284792
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

HURVITZ, ANDREW
Provider ID: 311581
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
Provider ID: 313510
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
Provider ID: 313511
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SEDGHI, SOUDABEH
Provider ID: 313490
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SEDGHI, SOUDABEH
Provider ID: 313491
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285246

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: 1437565488

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285245

Board Certified: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-8200

Fax: (888) 539-8781

After Hours Phone: (858) 657-8200

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277289

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346674561

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY THORACIC

BOYS, JOSHUA

Provider ID: 243533

Board Certified: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7777

After Hours Phone: (858) 657-7777

Provider Gender: Male

NPI: 1114368990

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

HOWE, STEVEN
Provider ID: 316122
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK
Provider ID: 274296
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK
Provider ID: 316139
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
Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK
Provider ID: 274297
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 316144
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: 1871752956
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 210576
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871752956
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

RAMIREZ, ALFREDO
Provider ID: 256390
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1003829417
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

ZANDER, ASHLEY
Provider ID: 291383
Board Certified: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780940031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

ZANDER, ASHLEY
Provider ID: 291382
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: 1780940031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

ZANDER, ASHLEY
Provider ID: 291381
Board Certified: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780940031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

BAGRODIA, ADITYA
Provider ID: 286165
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

CRAWFORD, ELWARD
Provider ID: 244131
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

GRIFFITHS, LUKE
Provider ID: 311498
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: 1760945836
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

KADER, ANDREW
Provider ID: 316152
Board Certified: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184731127
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

KANE, CHRISTOPHER

Provider ID: 312867
Board Certified: Yes
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1083636294
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MOORE, SARAH
Provider ID: 311609
Board Certified: No
IHP OF SOUTHERN CAL-PHP
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
NPI: 1538620760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM
Provider ID: 32053
Board Certified: Yes
PURUSHOTHAM AND AKTHER KOTHA MD INC
8860 CENTER DR STE 400
LA MESA, CA 91942
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619) 229-1995
Provider Gender: Male
NPI: 1093730814
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA
Provider ID: 265393
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
5565 GROSSMONT CENTER DR STE 202
LA MESA, CA 91942
Phone: (619) 461-6130
Fax: (619) 461-3108
After Hours Phone: (619) 461-6130
Provider Gender: Male

NPI: 1710996384
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Kannada, Spanish, Telugu*

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8:30AM-5PM*
- *Website: N/A*

IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI
Provider ID: 290704
Board Certified: 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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 295955
Board Certified: No
IHP OF SOUTHERN CAL-PHP
8851 CENTER DR STE 501
LA MESA, CA 91942
Phone: (619) 697-2456
Fax: (858) 429-7930
- *After Hours Phone: (619) 697-2456*

Provider Gender: Female
NPI: 1457670119
- *Provider English Spoken: Y*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 268693
Board Certified: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 589-5414
Fax: (619) 589-7391
- *After Hours Phone: (619)*

589-5414
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HOSPITALIST MD/DO

KUPELIAN, CHLOE
Provider ID: 310786
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD
Provider ID: 269161
Board Certified: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 405
LA MESA, CA 91942
Phone: (619) 582-2404
Fax: (619) 582-2915
After Hours Phone: (619) 582-2404
Provider Gender: Male
NPI: 1275514986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

YELLEN, LAURENCE
Provider ID: 269173
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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA
Provider ID: 272676
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1992149447
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296997
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8851 CENTER DR STE 201
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294656
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8851 CENTER DR STE 201
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294654
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 277317
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE
Provider ID: 277305
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 310548
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 311673
Board Certified: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Provider Gender: Male
NPI: 1710543111
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 297577
Board Certified: Yes
IHP OF SOUTHERN CAL-PHP
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Phone: (626) 206-0633
Fax: (760) 267-9160
After Hours Phone: (626) 206-0633
Provider Gender: Male
NPI: 1851349195
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 306768
Board Certified: Yes
UCSD MEDICAL GROUP
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Phone: (626) 206-0633
Fax: (760) 267-9160
After Hours Phone: (626) 206-0633
Provider Gender: Male
NPI: 1851349195
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 6\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 297578
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OPHTHALMOLOGY

HUDSON, HENRY
Provider ID: 312357
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (626) 412-4040
Fax: (760) 267-9160
After Hours Phone: (626) 412-4040
Provider Gender: Male
NPI: 1851349195
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OTOLARYNGOLOGY

MOSHTAGHI, OMID
Provider ID: 302380
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
NPI: 1730675927
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

MOSHTAGHI, OMID
Provider ID: 312373
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
NPI: 1730675927
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OTOLARYNGOLOGY

SAID, MENA
Provider ID: 311787
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

WHITE, KYLE

Provider ID: 302382

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL

Provider ID: 308638

Board Certified: No

IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT CENTER DR STE 510
LA MESA, CA 91942

Phone: (619) 303-7130

Fax: (619) 303-7150

After Hours Phone: (619) 303-7130

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL

Provider ID: 308213

Board Certified: No

COMMUNITY CARE IPA LLC

5565 GROSSMONT CENTER DR STE 510
LA MESA, CA 91942

Phone: (619) 303-7130

Fax: (619) 303-7150

After Hours Phone: (619) 303-7130

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

TRAN, HEATHER

Provider ID: 314735

Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IHP OF SOUTHERN CAL-PHP
5565 GROSSMONT CENTER DR STE 3
LA MESA, CA 91942
Phone: (619) 303-7130
Fax: (619) 303-7150
After Hours Phone: (619) 303-7130
Provider Gender: Female
NPI: 1124643564
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 303099
Board Certified: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499
After Hours Phone: (619) 740-4500
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 221089
Board Certified: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499
After Hours Phone: (619) 740-4500
Provider Gender: Female
NPI: 1053348920
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

LAKESIDE

CHIROPRACTOR

FIGUEROA, CHRISTOPHER
Provider ID: 312181
Board Certified: No
IHP OF SOUTHERN CAL-PHP
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 390-9975
Fax: (360) 462-2744

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 390-9975
Provider Gender: Male
NPI: 1487323119
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

HOURIHAN, KEITH
Provider ID: 257549
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Provider Gender: Male
NPI: 1306916994
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

MENIFEE

PHYSICIANS ASSISTANT

SMITH, KELLI
Provider ID: 272954
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 241738
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN
Provider ID: 287655
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 210100
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1427255967
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 268658
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

MIRACLE, ANGELYN
Provider ID: 300259
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE STE 200
MURRIETA, CA 92562
Phone: (951) 461-9300
Fax: (951) 461-9399
After Hours Phone: (951) 461-9300
Provider Gender: Female
NPI: 1144539842
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:30AM-12PM
M-F 8AM-5PM
SA 8:30AM-12PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SNYDER, MICHELLE
Provider ID: 210676
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851561054
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA
Provider ID: 210794
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346696044
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SYED-UDDIN, SUMIYAH
Provider ID: 297771
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 RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 311939
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6161
Fax: (951) 696-6293
After Hours Phone: (951) 696-6161
Provider Gender: Female
NPI: 1669962270
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 255941
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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 210826
Board Certified: No
UCSD MEDICAL GROUP
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PATEL, SAGAR
Provider ID: 283001
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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 202659
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 210573
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 275994
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 210605
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296988
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026

Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296992
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294649
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294652
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER

DR
MURRIETA, CA 92562
☎ *Phone: (858) 966-6710*
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301820
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ *Phone: (858) 966-6710*
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 297071
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 283334
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

JINDAL, ANUJA
Provider ID: 215521
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GOLD, JEFFREY
Provider ID: 215691
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE
Provider ID: 215442
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1528353521

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA
Provider ID: 215666
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 215606
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 267317
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 297010
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 215687
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 216415
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 215685
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1235287947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 311885
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1124580139
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 215684
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CARVALHO, DANIELA
Provider ID: 215332
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 310279
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG
Provider ID: 244898
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1400
After Hours Phone: (951) 600-1400
Provider Gender: Female
NPI: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

JIANG, WEN
Provider ID: 215564
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1659305753
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 254089
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 254296
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 297034
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male

NPI: 1508250747
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN
Provider ID: 311003
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO
Provider ID: 284119
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1114277787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER
Provider ID: 215743
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1760691950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 215645

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH

Provider ID: 313253

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1487821815

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239114

Board Certified: No

RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1376705707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE
Provider ID: 215679
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1417222472
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW
Provider ID: 215678
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1831423250
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ALAYARI, AMETHYST
Provider ID: 311383
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: 1740778653
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE
Provider ID: 216969
Board Certified: 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 INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA
Provider ID: 302318
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN
Provider ID: 275655
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID
Provider ID: 302147
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI
Provider ID: 287924
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Male
NPI: 1265867683
Provider English Spoken: Y
Provider Language(s)

Spoken: Turkish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN
Provider ID: 302353
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA
Provider ID: 216972
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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE
Provider ID: 243831
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 INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA
Provider ID: 248172
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Female
NPI: 1336503234
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
Provider ID: 301634
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW
Provider ID: 294678
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Male
NPI: 1184071516
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

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

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA
Provider ID: 301835
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Female
NPI: 1417496985
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VEGA, CAROLINA
Provider ID: 309972
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311395
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA
Provider ID: 302819
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1841721172
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301640
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1912369273
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW
Provider ID: 310618
Board Certified: 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
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

JAZAYERI, AMIR
Provider ID: 310953
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1316385925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SHARMA, ANITA
Provider ID: 311775
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1871989335
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 310301
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
NPI: 1609365402
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 294382
Board Certified: No

RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1144615659
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA
Provider ID: 215528
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

PHADKE, OMKAR
Provider ID: 315125
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

LOPEZ, XIMENA
Provider ID: 302857
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI
Provider ID: 302112
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PATTERSON, MARY
Provider ID: 215677
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

VARGAS TRUJILLO, MARCELA
Provider ID: 215602
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY
Provider ID: 215644
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN
Provider ID: 283113
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1366589640
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA
Provider ID: 215665
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1609017532
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275662
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE
Provider ID: 283086
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1336356203
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW
Provider ID: 215522
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1487635272
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 302453
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PULMONARY DISEASES

KUMAR, AVNEE
Provider ID: 300014
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 313307
Board Certified: No
UCSD MEDICAL GROUP
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407388564
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

SURI, RAJAT
Provider ID: 283350
Board Certified: No
UCSD MEDICAL GROUP
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951) 677-1111
Provider Gender: Male
NPI: 1144615337
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

FAIRBANKS, TIMOTHY
Provider ID: 246979
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1407010556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

KLING, KAREN
Provider ID: 215583
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1982775144
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL
VASCULAR

HOWE, STEVEN
Provider ID: 206761
Board Certified: No
UCSD MEDICAL GROUP
28062 BAXTER RD
MURRIETA, CA 92563
Phone: (877) 558-6248
After Hours Phone: (877) 558-6248
Provider Gender: Male
NPI: 1497702740
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHENG, YU-TSUN

Provider ID: 301902

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 283160

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1548417652

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 215420

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE

Provider ID: 310986

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1598147050
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

HOWE, STEVEN
Provider ID: 210169
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 210577
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NATIONAL CITY

CARDIOVASCULAR DISEASE

DAMANI, SAMIR
Provider ID: 310638
Board Certified: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Phone: (858) 800-2480
Fax: (858) 216-1908
After Hours Phone: (858) 800-2480
Provider Gender: Male
NPI: 1457379372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, ISIS

Provider ID: 302115

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Phone: (619) 470-1945

Fax: (619) 475-5048

After Hours Phone: (619) 470-1945

Provider Gender: Female

NPI: 1770124927

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422

Board Certified: 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

KIM, YUNMI

Provider ID: 312917

Board Certified: No

COMMUNITY CARE IPA LLC

2101 GRANGER AVE STE 101
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 356-2726

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1467166942

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 294308

Board Certified: No

COMMUNITY CARE IPA LLC

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844) 200-2426

Provider Gender: Female
NPI: 1093130395
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*
- *Website: N/A*

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MCCULLOUGH, LYAN LOVE
Provider ID: 310623
Board Certified: No
COMMUNITY CARE IPA LLC
- 2743 HIGHLAND AVE NATIONAL CITY, CA 91950
- *Phone: (844) 200-2426*

Fax: (619) 356-2726
- *After Hours Phone: (844) 200-2426*

Provider Gender: Female
NPI: 1063759181
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-6PM F 8AM-5PM*
- *Website: N/A*

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE
Provider ID: 303830
Board Certified: No
COMMUNITY CARE IPA LLC
- 2835 HIGHLAND AVE STE A NATIONAL CITY, CA 91950
- *Phone: (844) 200-2426*

Fax: (619) 477-2628
- *After Hours Phone: (844) 200-2426*

Provider Gender: Female
NPI: 1952925851
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*
- *Website: N/A*

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE
Provider ID: 303827
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
- *Accessibility: CONTACT*

PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

DERMATOLOGY

LIN, SHINKO
Provider ID: 306319
Board Certified: No
IHP OF SOUTHERN CAL-PHP
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO
Provider ID: 308216
Board Certified: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

FAMILY PRACTICE

MEDINA, ALEXANDER
Provider ID: 316321
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
Provider ID: 301784
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST
NATIONAL CITY, CA 91950

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1952563421
Provider English Spoken: Y
Provider Language(s) Spoken: Filipino, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROBERTS, POMAI
Provider ID: 301278
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1023278314
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

TRAN, KIM
Provider ID: 311691
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

TRAN, KIM
Provider ID: 312035
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1447873534
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

THAYER, KARISA
Provider ID: 310229
Board Certified: No
IHP OF SOUTHERN CAL-PHP
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1558765941
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR
Provider ID: 303098
Board Certified: No
IHP OF SOUTHERN CAL-PHP
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Phone: (858) 800-2480
Fax: (858) 216-1908
After Hours Phone: (858) 800-2480
Provider Gender: Male
NPI: 1457379372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

PANDHI, JAY
Provider ID: 269087
Board Certified: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Phone: (619) 512-1915
Fax: (619) 512-1913
After Hours Phone: (619) 512-1915
Provider Gender: Male
NPI: 1407997406
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEPHROLOGY

COMUNALE, RODERICK
Provider ID: 290784
Board Certified: No
IHP OF SOUTHERN CAL-PHP
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Phone: (858) 551-0276
Fax: (858) 454-8796

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (858) 551-0276
Provider Gender: Male
NPI: 1568462109
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 21\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN
Provider ID: 257478

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: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN
Provider ID: 206092

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: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN
Provider ID: 269247

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER
Provider ID: 302451
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 310549
Board Certified: No
IHP OF SOUTHERN CAL-PHP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
NPI: 1710543111
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TH 8:30AM-6PM F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

BARNARD, LUKE
Provider ID: 311674
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
Accessibility: CONTACT PROVIDER
Hours: TH 8:30AM-6PM F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

MUNDAE, RUSDEEP
Provider ID: 316982
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 307171
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 307113
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 474-2284
Fax: (619) 474-3919
After Hours Phone: (619) 474-2284
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 304538
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 425-7755
Fax: (619) 425-2138

After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KOO, ANITA
Provider ID: 306903
Board Certified: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN
Provider ID: 312235
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: 1053841478
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

THACH, QUEEN
Provider ID: 310537
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1053841478
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

ATMAR, AKMAL
Provider ID: 269784
Board Certified: 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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 9AM-5PM*
- *Website: N/A*

IPA: Community Care IPA LLC

PODIATRIST

CAINE, SAMUEL
Provider ID: 308212
Board Certified: No
COMMUNITY CARE IPA LLC
- 610 EUCLID AVE STE 301 NATIONAL CITY, CA 91950
- *Phone: (619) 292-2493*

Fax: (619) 618-0222
- *After Hours Phone: (619) 292-2493*

Provider Gender: Male
NPI: 1396230298
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

CAINE, SAMUEL
Provider ID: 308637
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 610 EUCLID AVE STE 301 NATIONAL CITY, CA 91950
- *Phone: (619) 292-2493*

Fax: (619) 618-0222
- *After Hours Phone: (619) 292-2493*

Provider Gender: Male
NPI: 1396230298
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, JOHN
Provider ID: 129542
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

DAVIDSON III, JOHN
Provider ID: 312176
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 9AM-4:30PM F 9AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED DIETITIAN / NUTRITIONIST

KRISHNAMURTHY, MEENAKSHI
Provider ID: 311655
Board Certified: No
IHP OF SOUTHERN CAL-PHP
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619) 475-4900
Provider Gender: Female
NPI: 1790304822
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON
Provider ID: 304531
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1336894724
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-1PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

CHUNG, PETER
Provider ID: 314479
Board Certified: No
COMMUNITY CARE IPA LLC
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1023837887
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 299888
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 287102
Board Certified: No
COMMUNITY CARE IPA LLC
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-6PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305012
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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

482-3000
Provider Gender: Female
NPI: 1457136269
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM F 7AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305011
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 301996
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
Provider ID: 286784
Board Certified: No
COMMUNITY CARE IPA LLC
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

PASCUAL, CHRISTOPHER
Provider ID: 314205
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

COMMUNITY CARE IPA LLC
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1093328064
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 10\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 7AM-7PM
F 7AM-5PM
SA 8AM-2PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD
Provider ID: 301110
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 7AM-7PM
TU 7AM-12PM
W-TH 7AM-7PM
F 7AM-12PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH
Provider ID: 301430
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: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH
Provider ID: 298366
Board Certified: No
COMMUNITY CARE IPA LLC
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

TORRES, MICHAEL
Provider ID: 316829
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: 1770302218
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 301533
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 299882
Board Certified: No
COMMUNITY CARE IPA LLC
3231 WARING CT STE K
OCEANSIDE, CA 92056
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BALDWIN, ANDREA
Provider ID: 294937
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
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 8AM-7PM
TH-F 8AM-5PM
SA 9AM-6PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA
Provider ID: 303861
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1427325166
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4:30PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

CARROLL, MAYA
Provider ID: 315199
Board Certified: No
IHP OF SOUTHERN CAL-PHP
619 CROUCH ST STE 100
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1699315473
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA
Provider ID: 315337
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1598158768
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA
Provider ID: 315336
Board Certified: No

IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1598158768
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA
Provider ID: 315338
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: 1598158768
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY
Provider ID: 301304
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 268660
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302299

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: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302300

Board Certified: No

IHP OF SOUTHERN CAL-PHP

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302298

Board Certified: No

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 310480

Board Certified: No

COMMUNITY CARE IPA LLC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304495

Board Certified: No

COMMUNITY CARE IPA LLC

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304494

Board Certified: No

COMMUNITY CARE IPA LLC

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298084

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298081

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 298082
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

LANG, LESLIE
Provider ID: 308045
Board Certified: No
IHP OF SOUTHERN CAL-PHP
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457366130
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NIBBELINK AHEARN, SANDRA
Provider ID: 310107
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760) 967-9900
Provider Gender: Female
NPI: 1326513441
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NIBBELINK AHEARN, SANDRA
Provider ID: 311969
Board Certified: 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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

967-9900
Provider Gender: Female
NPI: 1326513441
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PRITZKER, JOELY
Provider ID: 239772
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

RAYTA, NICOLE
Provider ID: 304682
Board Certified: No
IHP OF SOUTHERN CAL-PHP
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1689027542
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RICHARDS, KRISINDA
Provider ID: 313332
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1669914941
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL
Provider ID: 297730
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA
Provider ID: 242607
Board Certified: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619488731
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

WALKER, ALEXANDRA
Provider ID: 306002
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1578220612
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE
Provider ID: 290312
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1801134275
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

PERLMAN, TAMARA
Provider ID: 290733
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1730274374
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

ANDREWS, BRAD
Provider ID: 290542
Board Certified: No
IHP OF SOUTHERN CAL-PHP
619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1750791745
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

DERMATOLOGY

BROWN, REGINA
Provider ID: 309981
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 304934
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

FAMILY PRACTICE

MILLER, DIANA
Provider ID: 314934
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SALAMANCA, OMAR
Provider ID: 295469
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1083000947
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SEAWELL, CHRISTINE
Provider ID: 312255
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1982280939
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 282166
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296991
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294651
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264686
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 205437
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 255793
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1760730758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP

MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital,
SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEPHROLOGY

LIU, ANDREW
Provider ID: 308522
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW
Provider ID: 316347
Board Certified: No
COMMUNITY CARE IPA LLC
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW
Provider ID: 301573
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3300 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

NEPHROLOGY

LIU, ANDREW

Provider ID: 305443

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEUROLOGY

JINDAL, ANUJA

Provider ID: 206266

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEUROLOGY

PASSIAK, BRITTANY

Provider ID: 311210

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

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 311880

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 205619
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 267318
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 297013
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 205509
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 216416
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 205887
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020

Provider Gender: Male
NPI: 1235287947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 311888
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

KIM, MICHAEL
Provider ID: 290904
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
Accessibility: CONTACT PROVIDER
Hours: SU 8AM-5PM M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL
Provider ID: 290902
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8AM-5PM M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 206086
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 310281
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG
Provider ID: 244899
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: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 206111
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1124230909
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 297036
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 313255
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1235634015
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA
Provider ID: 303781
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1851927883
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN
Provider ID: 296537
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL
Provider ID: 311160
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 275786
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: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA
Provider ID: 302319
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD
Provider ID: 295456
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE
Provider ID: 205787
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1477626513
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL
Provider ID: 301251
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY
Provider ID: 311932
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH
Provider ID: 302801
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
Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205813
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311397
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301642
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1912369273
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN

Provider ID: 310303

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1609365402

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294643

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295852

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

Fax: (760) 607-5365

After Hours Phone: (760) 607-5350

Provider Gender: Male

NPI: 1407052459

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275661

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY

OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

KIM, DANIEL
Provider ID: 314074
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3629 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Male
NPI: 1275813370
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: ARROWHEAD REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RAMOS, ELENA
Provider ID: 301307
Board Certified: No
IHP OF SOUTHERN CAL-PHP
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1306489570
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 302455
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SALAZAR, CLAUDIA
Provider ID: 314056
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1649906108
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

JENSEN, BRIAN
Provider ID: 290775
Board Certified: No
IHP OF SOUTHERN CAL-PHP
619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1518138049
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

KRAPES, MICHAEL
Provider ID: 290097
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 311087
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, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HATEFI, DUSTIN

Provider ID: 311103

Board Certified: No

UCSD MEDICAL GROUP

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1790072106

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 311154

Board Certified: No

UCSD MEDICAL GROUP

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1710371273

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 311150

Board Certified: 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246469

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR
Provider ID: 260954
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1548417652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY
Provider ID: 205498
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 206129
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 310988
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

POWAY

CERTIFIED NURSE PRACTITIONER

WOLFE, AMANDA
Provider ID: 243582
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
15525 POMERADO RD STE B1
POWAY, CA 92064
Phone: (858) 457-8333
After Hours Phone: (858) 457-8333
Provider Gender: Female
NPI: 1063813475
Provider English Spoken: Y
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WRIGHT, KIMBERLY
Provider ID: 256378
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3200
Fax: (858) 673-1587
After Hours Phone: (858) 675-3200
Provider Gender: Female
NPI: 1811400708
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: Community Care IPA LLC

DERMATOLOGY

LIN, SHINKO

Provider ID: 308217

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: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO

Provider ID: 306320

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: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

POUSTI, BOBAK

Provider ID: 313151

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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

POUSTI, BOBAK

Provider ID: 311624

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
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-4:30PM F 8:30AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

FAMILY PRACTICE

NAJAND, SADAF
Provider ID: 270055
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858) 675-3200
Provider Gender: Female
NPI: 1669769717
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

CHEN, ANDREW
Provider ID: 269315
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3100
Fax: (858) 613-2937
After Hours Phone: (858) 675-3100
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERNAL MEDICINE

THAPER, MOHINDERPAL
Provider ID: 270016
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 575
POWAY, CA 92064
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
NPI: 1295795037
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 269450
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: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 206164
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
15615 POMERADO RD
POWAY, CA 92064
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 297072
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

HAMILTON, ROSS
Provider ID: 311790
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 580
POWAY, CA 92064
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
NPI: 1538587852
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC

OBSTETRICS / GYNECOLOGY

COBB, DAMON
Provider ID: 206030
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
15706 POMERADO RD STE 110
POWAY, CA 92064
Phone: (858) 485-0130
Fax: (858) 485-9424
After Hours Phone: (858) 485-0130
Provider Gender: Male
NPI: 1851435598
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9AM-4:30PM F 9AM-1PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

LOZIER, JEFFREY
Provider ID: 270187
Board Certified: Yes
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3100
Fax: (858) 618-1523
After Hours Phone: (858) 675-3100
Provider Gender: Male
NPI: 1225004450
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPTOMETRIST

KIM, MICHELLE
Provider ID: 270014
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

PODIATRIST

BRAZIER, SETH
Provider ID: 306398
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PODIATRIST

HAN, KYOUNG
Provider ID: 311056
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP,

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Rady Childrens Health Network

PODIATRIST

HAN, KYOUNG

Provider ID: 296326

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PODIATRIST

READ, TRENTON

Provider ID: 296656

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

15706 POMERADO RD STE 102
POWAY, CA 92064

Phone: (858) 485-1494

Fax: (858) 485-1515

After Hours Phone: (858) 485-1494

Provider Gender: Male

NPI: 1952963431

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

RHEUMATOLOGY

RAO, SOUMYA

Provider ID: 46060

Board Certified: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400
POWAY, CA 92064

Phone: (858) 675-3150

Fax: (858) 924-1775

After Hours Phone: (858) 675-3150

Provider Gender: Female

NPI: 1033388616

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Kannada, Russian, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

RHEUMATOLOGY

REDDY, SMITHA

Provider ID: 269402

Board Certified: No

COMMUNITY CARE IPA LLC
15725 POMERADO RD STE 117
POWAY, CA 92064
Phone: (858) 312-1717
Fax: (858) 435-0207
After Hours Phone: (858) 312-1717
Provider Gender: Female
NPI: 1750534715
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Kannada, Telugu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY GENERAL

GROVE, JAY
Provider ID: 305851
Board Certified: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD
POWAY, CA 92064
Phone: (760) 300-3647
Fax: (858) 207-0034
After Hours Phone: (760) 300-3647
Provider Gender: Male
NPI: 1912971334
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP
Provider ID: 119552
Board Certified: Yes
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 613-8900
Fax: (858) 618-1523
After Hours Phone: (858) 613-8900
Provider Gender: Male
NPI: 1407803687
Provider English Spoken: Y
Provider Language(s) Spoken: Armenian, Italian, Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP
Provider ID: 257485
Board Certified: Yes

BLUE SHIELD PROMISE HEALTH PLAN DIRECT
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 613-8900
Fax: (858) 618-1523
After Hours Phone: (858) 613-8900
Provider Gender: Male
NPI: 1407803687
Provider English Spoken: Y
Provider Language(s) Spoken: Armenian, Italian, Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

SURGERY ORTHOPEDIC

BRIED, JAMES
Provider ID: 269500
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RAMONA

CERTIFIED NURSE PRACTITIONER

SALAS GAERLAN, JESSICA
Provider ID: 269344
Board Certified: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065
Phone: (760) 789-5160
Fax: (760) 788-7962
After Hours Phone: (760) 789-5160
Provider Gender: Female
NPI: 1356817431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Community Care IPA LLC

FAMILY PRACTICE

WELLS, TODD
Provider ID: 299118
Board Certified: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065
Phone: (760) 789-5160
Fax: (760) 788-5892
After Hours Phone: (760) 789-5160
Provider Gender: Male
NPI: 1952377806
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

SAN DIEGO

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

SILVA ENCISO, JORGE
Provider ID: 312727
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

BALUCH, NARGES
Provider ID: 310787
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

ALLERGY IMMUNOLOGY

JAMES, CHRISTINE
Provider ID: 284917
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144589979
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

RIEDL, MARC
Provider ID: 255768
Board Certified: Yes
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN STE 230
SAN DIEGO, CA 92122
Phone: (858) 657-5350
After Hours Phone: (858) 657-5350
Provider Gender: Male
NPI: 1285654889
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

WANG, XINYU
Provider ID: 313573
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ALLERGY IMMUNOLOGY

WANG, XINYU
Provider ID: 313572
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

AL AZZAWI, SARAH
Provider ID: 312975
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
Cultural Competency: N

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

ANESTHESIOLOGY

AL AZZAWI, SARAH
Provider ID: 312973
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (858) 554-1212
Fax: (888) 539-8781
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1063041887
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ALEXANDER, BRENTON
Provider ID: 242303
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA
Provider ID: 300068
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BHATIA, KARISHMA
Provider ID: 313006
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BHATIA, KARISHMA
Provider ID: 313008
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, ELSIE
Provider ID: 313507
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, ELSIE
Provider ID: 313508
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, SPENCER
Provider ID: 317387
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BIGELOW, SPENCER
Provider ID: 317389

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: 1124656020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BUI, AN
Provider ID: 316093
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: 1467080341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

BUI, AN
Provider ID: 316094
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1467080341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CABANISS, SCOTT
Provider ID: 311436
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CABANISS, SCOTT
Provider ID: 311435
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CANO, SARAH
Provider ID: 200959
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW
Provider ID: 310044
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CHAN, CHI-BEW
Provider ID: 310043
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN
Provider ID: 311460
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

COBLENTZ, IAN
Provider ID: 311461
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

CURRAN, BRIAN
Provider ID: 239002
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

DARWISH, ALEX
Provider ID: 313025
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

DARWISH, ALEX
Provider ID: 313027
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FEJLEH, ASHLEY
Provider ID: 269502
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

FUNDINGSLAND, BRENT
Provider ID: 280468
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

GARRETT, RILEY
Provider ID: 313742
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GARRETT, RILEY
Provider ID: 313740
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE
Provider ID: 311501
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: 1205381316
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

GOH, REGINE
Provider ID: 311500
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205381316
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

HUME, QUINN
Provider ID: 316905
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 241735
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KAWASAKI, MEGAN
Provider ID: 313585
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KAWASAKI, MEGAN
Provider ID: 313583
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KIM, ELIZABETH

Provider ID: 313002
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KIM, ELIZABETH
Provider ID: 313004
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KROL, CAITLIN
Provider ID: 313048
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KROL, CAITLIN
Provider ID: 313046
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MALONEY, IAN
Provider ID: 313016
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MALONEY, IAN
Provider ID: 313014
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEASER, JACQUELINE
Provider ID: 312976
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEASER, JACQUELINE
Provider ID: 312978
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

MEYER, MEGAN
Provider ID: 239607
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 JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

MILLAR, MELISSA

Provider ID: 201308

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-5754

After Hours Phone: (619) 543-5754

Provider Gender: Female

NPI: 1417361981

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL

Provider ID: 311123

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679584791

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

MOELLENHOFF, MICHAEL

Provider ID: 311124

Board Certified: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679584791

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

NGUYEN, QUOC SY

Provider ID: 242188

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

OSWALD, JESSICA
Provider ID: 239600
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SHAW, SUSANNA
Provider ID: 255316
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SNOW, ERICA
Provider ID: 312989
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

SNOW, ERICA

Provider ID: 312990

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243294

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SREJIC, UNA

Provider ID: 206383

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286569

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TRIVEDI, SURAJ
Provider ID: 246749
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TSUDA, PAIGE
Provider ID: 271682
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TU, MONIQUE
Provider ID: 310428
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, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TULLY, JEFFREY
Provider ID: 283689
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

TZENG, ERIC
Provider ID: 284577
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

YOUNAN, LAWRENCE
Provider ID: 240870
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ZAERPOOR, DARA
Provider ID: 313030
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Male
NPI: 1497226450
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

ZAERPOOR, DARA
Provider ID: 313029
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN
Provider ID: 280539
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL
Provider ID: 243553
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1700296514
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 300089

Board Certified: No
IHP OF SOUTHERN CAL-PHP
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON
Provider ID: 299880
Board Certified: No
COMMUNITY CARE IPA LLC
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DEJULIO, PAUL
Provider ID: 316043
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

DEJULIO, PAUL
Provider ID: 316042
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY PAIN MANAGEMENT

PHILLIPS, COTI
Provider ID: 317413
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

AUDIOLOGIST

ARHART, KESLEY
Provider ID: 316863
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DRFL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0070
Fax: (858) 909-0880
After Hours Phone: (858) 909-0070
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

EARLES, LYDIA
Provider ID: 317318
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

AUDIOLOGIST

KIM, SHANNON
Provider ID: 313050
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

AUDIOLOGIST

SERENO, EMILY
Provider ID: 317155
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: 1023789591
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CARDIAC ELECTROPHYSIOLOGY

BIRGERSDOTTER GREEN, ULRIKA
Provider ID: 312708
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 312717
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 210099
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 210012
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
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HO, GORDON
Provider ID: 312729
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIAC

ELECTROPHYSIOLOGY

RAISSI SHABARI, FARSHAD
Provider ID: 312736
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: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALANI, ANAS

Provider ID: 201252
Board Certified: Yes
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1154633709
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, ARROWHEAD REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY REGIONAL MED CTR, LAC RANCHO LOS AMIGOS NATIONAL REHAB CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

ALSHAWABKEH, LAITH
Provider ID: 312690
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CARAZO, MATTHEW
Provider ID: 312734
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 312679
Board Certified: No
UCSD MEDICAL GROUP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

2131 3RD AVE
SAN DIEGO, CA 92101
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 211764
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST FL 3
SAN DIEGO, CA 92103
Phone: (858) 657-8530
Fax: (619) 543-2287
After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS
Provider ID: 211765
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

COTTER, BRUNO
Provider ID: 312732
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1205886389
Provider English Spoken: Y
Provider Language(s) Spoken: French, German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 312680
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE
SAN DIEGO, CA 92101
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851561021
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 312913
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

MIZZELL, ANNA
Provider ID: 214020
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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 312914
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891958773
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 316062
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891958773
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

NAREZKINA, ANNA
Provider ID: 312915
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS
Provider ID: 239946
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023373040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

PROHASKA, THOMAS
Provider ID: 299912
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861889644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

RAMSIS, MATTHEUS
Provider ID: 310450
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY
Provider ID: 312725
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY
Provider ID: 313720
Board Certified: No
UCSD MEDICAL GROUP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811382815
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEN, JIA
Provider ID: 311526
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295053403
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEN, JIA
Provider ID: 312731
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI
Provider ID: 301306
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 CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI
Provider ID: 302987
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

SILVA ENCISO, JORGE
Provider ID: 313721
Board Certified: 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
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 312911
Board Certified: No

UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699063701
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 312910
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699063701
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

WILKINSON, MICHAEL
Provider ID: 316083
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699063701
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

YEANG, CALVIN
Provider ID: 238822
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 657-8530
After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1598011058
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

APPENZELLER, ERICA
Provider ID: 310772
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Provider Gender: Female
NPI: 1780828384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 277966
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 304138
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 277968
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 304137
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE
Provider ID: 277967
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 311063
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

DISTEFANO, KIMBERLY
Provider ID: 311062
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851914220
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LAM, KHANH
Provider ID: 295380
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 312189
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 312190
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

LEE, JIHYUNG
Provider ID: 312192
Board Certified: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD
STE 200

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN
Provider ID: 246474
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: 1396876959
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

ABU-DOULEH, NADIA
Provider ID: 311556
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA
Provider ID: 304624
Board Certified: No
IHP OF SOUTHERN CAL-PHP
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Female
NPI: 1245966092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PRACTITIONER

ALLEN, KATHERINE
Provider ID: 315215
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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ALSTEEN, STEPHANIE
Provider ID: 291389
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013680982
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

AMOS, MARIA
Provider ID: 291439
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ARENAS, CECILY
Provider ID: 311129
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BAKER, TANYA
Provider ID: 255625
Board Certified: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Provider Gender: Female
NPI: 1699184259
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BENARD, ROBERT
Provider ID: 268229
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184027724
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, Highland Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BILOTTA, NATALIE
Provider ID: 291418
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA
Provider ID: 307669
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750033890
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA
Provider ID: 307668
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 922-6827
After Hours Phone: (800) 922-6827
Provider Gender: Female
NPI: 1750033890
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA
Provider ID: 311039
Board Certified: No
UCSD MEDICAL GROUP
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750033890
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA
Provider ID: 243718
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851749253
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BUI, ANH

Provider ID: 304273
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1184309684
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BUI, ANH
Provider ID: 304272
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1184309684
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER
Provider ID: 241031
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336258276
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHANTALA, ELIZABETH
Provider ID: 291305
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942430442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHAVEZ, ALEXANDRIA

Provider ID: 243357

Board Certified: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811543622

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHEATHAM, BRITTANY

Provider ID: 291461

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1184111684

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286369

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104173558

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286368

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
NPI: 1104173558
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CHUNG, SUEMIN
Provider ID: 311038
Board Certified: No
UCSD MEDICAL GROUP
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1598477093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 316077
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194551861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 316076
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194551861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 316078
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CIAFONE, JOANNA
Provider ID: 316074
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COLEMAN, PAGE
Provider ID: 304288
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: 1871365312
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COLEMAN, PAGE
Provider ID: 311049
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: 1871365312
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA
Provider ID: 299930
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE
Provider ID: 279835
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE
Provider ID: 279836
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: 1609081710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CORREA, ANN MARIE
Provider ID: 314732
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: 1083420814
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

COSINO, ANJELICA
Provider ID: 201309
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295238749
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 316071
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487368114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK
Provider ID: 316070
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1487368114
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK

Provider ID: 316072

Board Certified: 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK

Provider ID: 316068

Board Certified: No

UCSD MEDICAL GROUP

6645 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1487368114

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK

Provider ID: 316069

Board Certified: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1487368114

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK

Provider ID: 313811

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619) 563-0250

Provider Gender: Male

NPI: 1487368114

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CRAWFORD, MARK

Provider ID: 313812

Board Certified: 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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 253692

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DAVIES-UPPAL, ALLISON

Provider ID: 311441

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: 1053002360

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DAVIS, JANET

Provider ID: 255796

Board Certified: No

UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9250

Fax: (619) 471-9275

After Hours Phone: (619) 471-9250
Provider Gender: Female
NPI: 1164616280
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE
Provider ID: 300051
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DECOOL, TAYLOR
Provider ID: 314112
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Provider Gender: Female
NPI: 1548019763
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN
Provider ID: 301725
Board Certified: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1437662863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN
Provider ID: 301726

Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1437662863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEUTSCH, KAREN
Provider ID: 247981
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740517127
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEUTSCH, KAREN
Provider ID: 247980
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DOAN, ANGELA
Provider ID: 291425
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
Accessibility: CONTACT PROVIDER
Website: N/A

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DOAN, ANGELA

Provider ID: 291426

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286345

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN

Provider ID: 269863

Board Certified: No

COMMUNITY CARE IPA LLC

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Phone: (619) 297-4707

Fax: (858) 429-7927

After Hours Phone: (619) 297-4707

Provider Gender: Female

NPI: 1003260894

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ECLARINO, GALELEO

Provider ID: 316359

Board Certified: No

COMMUNITY CARE IPA LLC

9995 CARMEL MOUNTAIN RD STE B10
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 240-6470

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1518687748

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

ECLARINO, GALELEO

Provider ID: 296764

Board Certified: No

COMMUNITY CARE IPA LLC

9995 CARMEL MOUNTAIN RD STE B1011
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 240-6470

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1518687748

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

EDNACOT, KARYNNE

Provider ID: 309725

Board Certified: No

COMMUNITY CARE IPA LLC

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Phone: (858) 650-5000

Fax: (858) 636-2903

After Hours Phone: (858) 650-5000

Provider Gender: Female

NPI: 1548027964

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

EDNACOT, KARYNNE

Provider ID: 309540

Board Certified: No

IHP OF SOUTHERN CAL-PHP

8010 FROST ST STE 100
SAN DIEGO, CA 92123

Phone: (858) 650-5000

Fax: (858) 636-2903

After Hours Phone: (858) 650-5000

Provider Gender: Female

NPI: 1548027964

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA

Provider ID: 278982

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1669442182

Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA
Provider ID: 287444
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669442182
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

FELD, KEREN
Provider ID: 297672
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Female
NPI: 1730835083
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FERMIL, YVONNE
Provider ID: 311352
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FISHER, SLOANE
Provider ID: 301585
Board Certified: No
RADY CHILDRENS HEALTH

NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1538807003
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299467
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299466
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE
Provider ID: 299468
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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

CERTIFIED NURSE PRACTITIONER

GRAYSON, ANDREA
Provider ID: 310325
Board Certified: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1447577671
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 293261
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 293260
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HARKNESS, RUMIKO
Provider ID: 208841
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: 1487785093
Provider English Spoken: Y
Provider Language(s)

Spoken: Japanese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HART, BECKY
Provider ID: 305337
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Provider Gender: Female
NPI: 1316626344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN
Provider ID: 268656
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

HEFNER, ANNA
Provider ID: 308420
Board Certified: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 434-1613
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1588913537
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA
Provider ID: 284022
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1861956724
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HOERRES, LYNN
Provider ID: 315272
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Female
NPI: 1689226508
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 295392
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W 8:30AM-5:30PM
TH 8:30AM-8:30PM
F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA
Provider ID: 295393
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W 8:30AM-5:30PM
TH 8:30AM-8:30PM
F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

JONES, CHRISTA
Provider ID: 275563
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396371431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

KIDANE, ZINNIA
Provider ID: 302426
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KIDANE, ZINNIA
Provider ID: 302427
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1780334110
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

KIM, YUNMI

Provider ID: 312916

Board Certified: No

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1467166942

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

LAFORTEZA, JOZELLE

Provider ID: 202666

Board Certified: No

UCSD MEDICAL GROUP

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538578307

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE

Provider ID: 316090

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: 1265019020

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE

Provider ID: 316089

Board Certified: No

UCSD MEDICAL GROUP

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265019020

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 316091
Board Certified: No
UCSD MEDICAL GROUP
6363 GREENWICH DR
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265019020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 316087
Board Certified: No
UCSD MEDICAL GROUP
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265019020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LAINE, LESLIE
Provider ID: 316088
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265019020
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301597
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301600

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Phone: (858) 430-1101

Fax: (858) 221-5049

After Hours Phone: (858) 430-1101

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301601

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Phone: (858) 430-1101

Fax: (858) 221-5049

After Hours Phone: (858) 430-1101

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301603

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Phone: (619) 297-4707

Fax: (858) 429-7927

After Hours Phone: (619) 297-4707

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

LUNA, ABIGAIL

Provider ID: 315816

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

Accessibility: CONTACT PROVIDER

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MANZO, CORINA
Provider ID: 304481
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Provider Gender: Female
NPI: 1669087326
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN
Provider ID: 293345
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MEDINA, RUBELETA
Provider ID: 296673
Board Certified: No
COMMUNITY CARE IPA LLC
9995 CARMEL MOUNTAIN RD STE B1011
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1881153963
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETEL MARIE
Provider ID: 303202
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
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299648
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299647
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON
Provider ID: 299649
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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE
Provider ID: 303828

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MIDORO, ABEGAILLE
Provider ID: 303829
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
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MILLER, EVA
Provider ID: 255833
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (619) 471-9210
After Hours Phone: (619) 471-9210
Provider Gender: Female
NPI: 1043492523
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA
Provider ID: 201325
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952627176
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NEJATI, FRESHTA
Provider ID: 214112
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 314347
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1316619430
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 314650
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 314348
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NORTON, CALEB
Provider ID: 314349
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

OCONNELL, STEFANY
Provider ID: 296846
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OPARA, CHINYERE
Provider ID: 317118
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH
Provider ID: 296716
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1073278180
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH
Provider ID: 296715
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1073278180
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 314360
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 314361
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: 1003677816
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 314362
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PACIS, NOAH
Provider ID: 314363
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAI, SARAH
Provider ID: 276870
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PAPPALARDO, ASHLEY
Provider ID: 311107
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 293249
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RAJAEI, NILOUFAR
Provider ID: 291437
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RAJIV, RENUKA
Provider ID: 315856
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
Accessibility: CONTACT

PROVIDER
Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RALEIGH, DEBORAH
Provider ID: 312728
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
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RANDLE, CARRIE
Provider ID: 299296
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1558557348
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: NAVAL MEDICAL CTR SD RBE, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

RIEGO, SUZANNE
Provider ID: 214477
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

RILEY, JEREN
Provider ID: 313876
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE
Provider ID: 295956
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1225782022
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 302559
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 311051
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL
Provider ID: 287763
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROZO, JOSE
Provider ID: 300037
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 293287
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY
Provider ID: 293288
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: 1285732586
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL
Provider ID: 312993
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205579141
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SALINAS, NIECEL
Provider ID: 316095
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL
Provider ID: 297728
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
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL
Provider ID: 297729

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 293285
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE
Provider ID: 293286
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE
Provider ID: 293258
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293259

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: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SEARS-WILEY, ELIZABETH

Provider ID: 276851

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE

Provider ID: 246423

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE

Provider ID: 256646

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 311055
Board Certified: No
UCSD MEDICAL GROUP
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932522778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

SWANSON, BRIANNA
Provider ID: 313920
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Female
NPI: 1538848148
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SWANSON, BRIANNA
Provider ID: 313921
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1538848148
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SWARTZ, ERIN
Provider ID: 255787
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 657-8530
After Hours Phone: (858) 657-8530
Provider Gender: Female
NPI: 1639571292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TAING, JENNIFER
Provider ID: 201573
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1649528357
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TALBOT, ADRIANNE
Provider ID: 278183
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST STE 1A
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992048557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

THOMPSON, COURTNEY
Provider ID: 311544
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TONG, KIM
Provider ID: 313528
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TONG, KIM
Provider ID: 313526
Board Certified: No
UCSD MEDICAL GROUP
408 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861069874
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TREJO, ANA
Provider ID: 307672
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA
Provider ID: 307659
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TUCKER, LANIKA
Provider ID: 307657
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

VIBAL-POASTER, MARIA KHRISTINA
Provider ID: 205651
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WALDRUP, LA RHONDA
Provider ID: 299260
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 316186
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: 1942037510
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 316185
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 316182
Board Certified: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942037510
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 316183
Board Certified: No
UCSD MEDICAL GROUP
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942037510
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 316184
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 313931
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WEIMER, BRYANA
Provider ID: 313932
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1942037510
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WIETZKE, MATTHEW
Provider ID: 311060
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WOO, ANDY

Provider ID: 299916

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WOO, ANDY

Provider ID: 311024

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

WOOLSEY, EMILY

Provider ID: 316867

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

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
TU 8AM-7:30PM
W 8AM-5PM
TH 8AM-7:30PM
F 8AM-5PM
SA 8AM-12PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256374

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

APPLEGET, JOSEPH
Provider ID: 239602
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA
Provider ID: 312687
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1356100051
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARSOTTI, ALEXANDRA
Provider ID: 312688
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1356100051
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BOEING, KRISTINA
Provider ID: 274397
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

NPI: 1205134301
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BURROWS, TERENCE
Provider ID: 256694
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023194560
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL
Provider ID: 316039
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CHALISON, DANIEL
Provider ID: 316038
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CONRAD, SIMON
Provider ID: 316113
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

CONRAD, SIMON
Provider ID: 316112
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952970014
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DAVENPORT, LARIS
Provider ID: 316178
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DAVENPORT, LARIS
Provider ID: 316179
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 316024
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DIAZ, VICTOR
Provider ID: 316023
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

DOLLAND, STEVEN
Provider ID: 280552
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 311600
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FARRIS, AMANDA
Provider ID: 311601
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

FERRITER, STACY
Provider ID: 265295
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: 1780725556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN
Provider ID: 217365
Board Certified: No
UCSD MEDICAL GROUP
200 W 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA
Provider ID: 299905
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083254205
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL

Provider ID: 316131
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1053971903
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HARMEYER, DANIEL
Provider ID: 316130
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1053971903
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LANDON
Provider ID: 316173
Board Certified: No
UCSD MEDICAL 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

HOWARD, LANDON
Provider ID: 316174
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

KEHOE, KATRINA
Provider ID: 317433
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON
Provider ID: 311518
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

LANTRIP, KEATON
Provider ID: 311517
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE
Provider ID: 291404
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

RHYNER, GINA
Provider ID: 313688
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: 1508163437
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT
Provider ID: 278003
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982133591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SAURE, MELISSA
Provider ID: 317412
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SCOTT, TIFFANY
Provider ID: 312869
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SCOTT, TIFFANY
Provider ID: 312870
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1376885186
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

SERRA, NATALIE
Provider ID: 317407
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TOCCO, JESSICA
Provider ID: 312885
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TOCCO, JESSICA
Provider ID: 312884
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN
Provider ID: 316066
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

TRAN, HAN
Provider ID: 316065
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

VINCENT, BERLIN
Provider ID: 291454
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL
Provider ID: 313052
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

WAKEFIELD, CHANTAL
Provider ID: 313053
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 301714
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE
Provider ID: 301715
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

EKHOLM, JANNA
Provider ID: 290584
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 210018

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 210019
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518274919
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA
Provider ID: 210053
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA
Provider ID: 210052
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE
Provider ID: 210041
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1285667741
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 210058
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891752069
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 210055
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER
Provider ID: 210054
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-7878
After Hours Phone: (619)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

543-7878
Provider Gender: Female
NPI: 1891752069
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY
Provider ID: 301047
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235670977
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY
Provider ID: 301048
Board Certified: No
UCSD MEDICAL GROUP
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235670977
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CHIROPRACTOR

CHAMPAGNE, ALLISON
Provider ID: 310817
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

LUU, DANIEL
Provider ID: 269883
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1225108269
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 10AM-6PM
TU 10AM-2PM
W 10AM-6PM
TH 10AM-2PM
F 10AM-6PM
Website: N/A
IPA: Community Care IPA LLC

CHIROPRACTOR

MONTANE, RUBEN
Provider ID: 309694
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Male
NPI: 1346725769
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

DERMATOLOGY

BRIONES, NAOMI
Provider ID: 313462
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477013878
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

CALAME, ANTOANELLA
Provider ID: 290301
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Phone: (858) 750-2983
Fax: (858) 750-2984
After Hours Phone: (858) 750-2983
Provider Gender: Female
NPI: 1285817569
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, YUMA REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

DERMATOLOGY

DANG, TIMOTHY
Provider ID: 309721

Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1518427913
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KANNAN, SWATI
Provider ID: 286287
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1508155227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KAUNITZ, GENEVIEVE
Provider ID: 285011
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1053734905
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KIM, GRACE
Provider ID: 313549
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

KOLAR, MATTHEW
Provider ID: 312036
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: 1164050167
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

LIN, SHINKO
Provider ID: 308736
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

LIN, SHINKO
Provider ID: 308915
Board Certified: No
COMMUNITY CARE IPA LLC
5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

DERMATOLOGY

LIOU, YUJIE
Provider ID: 308315
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

MALONEY, NOLAN
Provider ID: 311459
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

SHI, VERONICA
Provider ID: 271713
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

SHI, VERONICA
Provider ID: 286335
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

STERN, MARLEIGH
Provider ID: 306888
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

SUTHERLAND, ANNA
Provider ID: 311463
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

WONG, HENRY
Provider ID: 313609
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

DERMATOLOGY

ZUBAIR, RAHEEL
Provider ID: 306520
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

EMERGENCY MEDICINE

AMANN, CHRISTOPHER
Provider ID: 270913
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

AUSTIN, ANDREA
Provider ID: 269291
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811289093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: 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: 271132
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
Provider ID: 271130
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (855) 535-5864
Fax: (888) 539-8781
After Hours Phone: (855)

535-5864
Provider Gender: Male
NPI: 1801207006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BARRY, JEFFREY
Provider ID: 271129
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 270333
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 270334
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY
Provider ID: 270336
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 313568
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CASAS, TAMARA
Provider ID: 311938
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1669962270
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 287430
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHEN, ALICE
Provider ID: 287428
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CHIN, BRIAN
Provider ID: 313570
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COOK, LEANNE
Provider ID: 313633

Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1053948687
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN
Provider ID: 316205
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

CORBETT, BRYAN
Provider ID: 316204
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

COYNE, CHRISTOPHER
Provider ID: 303036
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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

DHILLON, NAVNEET

Provider ID: 313517

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

DOROS, JOSHUA

Provider ID: 315893

Board Certified: No

UCSD MEDICAL 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

EAGLE, SONJA

Provider ID: 311503

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNA

Provider ID: 301711

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: PIONEERS MEMORIAL HOSPITAL, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 240022
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205214442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HRYNIEWICKI, ADAM
Provider ID: 313523
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184244014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

JACKSON, MEGAN
Provider ID: 313540
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: 1154958437
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KRYSHTAFOVYCH, SOLOMIYA
Provider ID: 313020
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801425244
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KRYSHTAFOVYCH, SOLOMIYA
Provider ID: 313019
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801425244
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

KUTZ, CRAIG
Provider ID: 283845
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598295925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAFREE, ANDREW
Provider ID: 313675
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LAFREE, ANDREW
Provider ID: 313673
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 316017
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
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LASOFF, DANIEL
Provider ID: 316016
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LATHAM, EMI
Provider ID: 316096
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6400
After Hours Phone: (619) 543-6400
Provider Gender: Female
NPI: 1871594903
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, PARADISE VALLEY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 313017
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 313311
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIOTTA, BENJAMIN
Provider ID: 285630
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1396270278
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LIPPI, MATTHEW
Provider ID: 311492
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH

Provider ID: 316151

Board Certified: No

UCSD MEDICAL GROUP

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033140843

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

LY, BINH

Provider ID: 316148

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-3115

After Hours Phone: (619) 543-3115

Provider Gender: Male

NPI: 1033140843

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

MASON, MATTHEW

Provider ID: 313687

Board Certified: 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

MEDAK, ANTHONY

Provider ID: 316010

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6217

After Hours Phone: (619) 543-6217

Provider Gender: Male

NPI: 1285675116

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, PARADISE VALLEY HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

MERTE, BRYAN
Provider ID: 313611
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124657804
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN
Provider ID: 239797
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6400
After Hours Phone: (619) 543-6400
Provider Gender: Female
NPI: 1871732214
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

NOSTE, ERIN
Provider ID: 239798
Board Certified: 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: CONTACT PROVIDER
Hours: SU 8AM-10PM
M-F 8AM-5PM
SA 8AM-10PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY
Provider ID: 285607

Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366478372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 304933
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1811423072
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 304937
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

ROURKE, KYLE
Provider ID: 313483
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

RUDOLF, FRANCES
Provider ID: 240159
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-7000
After Hours Phone: (858) 657-7000
Provider Gender: Female
NPI: 1821487430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: 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: 243441
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SADLER, CHARLOTTE
Provider ID: 316055
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SAMHA, LEEN

Provider ID: 313010
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SANDIFORD, PATRICK
Provider ID: 312859
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: 1700151917
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 316154
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1467495770
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SCHNEIR, AARON
Provider ID: 316153
Board Certified: No
UCSD MEDICAL GROUP
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1467495770
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SEGAL, LAUREN
Provider ID: 313710
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELF, MICHAEL
Provider ID: 313747
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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SELTZER, JUSTIN
Provider ID: 315889
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447791843
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SHISHLOV, KIRILL
Provider ID: 313658
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114248077
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SHISHLOV, KIRILL
Provider ID: 313656
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SLOANE, CHRISTIAN
Provider ID: 209518
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: 1841233145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 313730
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 313727
Board Certified: No
UCSD MEDICAL GROUP
4077 5TH AVE
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871099333
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

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

EMERGENCY MEDICINE

SMITH, CASEY
Provider ID: 313729
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

SNYDER, BRIAN
Provider ID: 316145
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1538102835
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 315894
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
Provider ID: 240124
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: CONTACT PROVIDER*
- *Hours: SU 8AM-8PM M-F 8AM-5PM SA 8AM-8PM*
- *Website: N/A*

IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 313737
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
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 315882
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 313735
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TOMASZEWSKI, CHRISTIAN
Provider ID: 313736
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: 1982629408
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

TORRES, ERICK
Provider ID: 313618
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WARDI, GABRIEL
Provider ID: 316080
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720346083
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

WAYMENT, ANDREW
Provider ID: 313529
Board Certified: No

UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013593839
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: BEAR VALLEY COMM HOSP, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YOU, ALAN
Provider ID: 269936
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225425697
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE
Provider ID: 301708
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528564150
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

YU, ELAINE
Provider ID: 313702
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
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

DECAMPS, SCARLETT

Provider ID: 311511

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1477014611

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s) Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813

Board Certified: No

UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s) Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605

Board Certified: No

UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (858) 657-7298

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265695795

Provider English Spoken: Y

Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

KULASA, KRISTEN
Provider ID: 255622
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (619) 543-6500
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932324175
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI
Provider ID: 287780
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI
Provider ID: 287781
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287779

Board Certified: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY
METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287782

Board Certified: No

UCSD MEDICAL GROUP

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY
METABOLISM DIABETES

PHATAK, SONAL

Provider ID: 316053

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY
METABOLISM DIABETES

PHATAK, SONAL

Provider ID: 316054

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

ENDOCRINOLOGY METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA
Provider ID: 256091
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (858) 657-7298
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518163799
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

ALDERSON, CHEVON
Provider ID: 315439
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Provider Gender: Female
NPI: 1396124145
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BELL, TRACY
Provider ID: 304813
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BELL, TRACY
Provider ID: 304814
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1497821318
Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BERNADETT, ALEX
Provider ID: 296740
Board Certified: No
UCSD MEDICAL GROUP
10505 SORRENTO VALLEY RD STE 200
SAN DIEGO, CA 92121
Phone: (858) 793-7860
Fax: (858) 436-1289
After Hours Phone: (858) 793-7860
Provider Gender: Male
NPI: 1215382841
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

BERNADETT, ALEX
Provider ID: 296739
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CARRAGEE, CATHERINE
Provider ID: 313616
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 207163
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 207167
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

CHEN, ALICE
Provider ID: 207164
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

DANG, LAUREL
Provider ID: 309605
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: 1396366050
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

HONG, DANA

Provider ID: 311455

Board Certified: No

UCSD MEDICAL GROUP

9333 GENESEE AVE
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1982276341

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

JOHN, TANNER

Provider ID: 303515

Board Certified: No

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1043707326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300060

Board Certified: No

UCSD MEDICAL GROUP

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300057

Board Certified: 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 300058
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

JOLICOEUR, MEGAN
Provider ID: 300059
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

KIDDER, BRENDAN
Provider ID: 316876
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: CONTACT PROVIDER
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: 291448
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

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: 1205848363

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

MARTINEZ, BRIANNA

Provider ID: 311506

Board Certified: No

UCSD MEDICAL GROUP

9333 GENESEE AVE
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1770161150

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847

Board Certified: No

IHP OF SOUTHERN CAL-PHP

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619) 234-2158

Provider Gender: Male

NPI: 1861637217

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304277

Board Certified: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1275945446

Provider English Spoken: Y

Provider Language(s) Spoken: Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

PERESS, LILIA
Provider ID: 304276
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1275945446
Provider English Spoken: Y
Provider Language(s) Spoken: Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

RIDGE, NEAL
Provider ID: 315976
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1053381004
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ROSADO, IVAN
Provider ID: 299244
Board Certified: No
IHP OF SOUTHERN CAL-PHP
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
Fax: (619) 238-3807
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1316479603
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:30AM-5:30PM
M-F 8:30AM-5:30PM
SA 8:30AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

RYAN, RHIANNON
Provider ID: 311477
Board Certified: No
UCSD MEDICAL GROUP
9333 GENESEE AVE
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1184205668
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

FAMILY PRACTICE

SCOTT, LAGINA
Provider ID: 302648
Board Certified: No
IHP OF SOUTHERN CAL-PHP
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 263-9601
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1558897009
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON
Provider ID: 312247
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON
Provider ID: 312246
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON
Provider ID: 312249
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1609295526
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SHMERLING, ALISON
Provider ID: 312248
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1609295526
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY
Provider ID: 290976
Board Certified: Yes
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1124288873
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

VAN PRATT LEVIN, BENJAMIN
Provider ID: 302531
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Male
NPI: 1619438330
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

VO, PHU LUONG
Provider ID: 303332
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1043849177
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 256956
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
Provider ID: 256955
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 304187
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
Provider ID: 272837
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

BAUMAN, LAURA
Provider ID: 260041
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GASTROENTEROLOGY

BRANCH, LAUREL
Provider ID: 313513
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

BRANCH, LAUREL
Provider ID: 313516
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

CARETHERS, JOHN
Provider ID: 311109
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

CHAVEZ, LUIS
Provider ID: 311340
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 304204
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DAVE, SHRAVAN
Provider ID: 270450
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316546

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

DZIEGIELEWSKI, CLAUDIA

Provider ID: 316549

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: 1093548117

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

KRAUSE, AMANDA

Provider ID: 313631

Board Certified: No

UCSD MEDICAL GROUP

200 W 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

KUMAR, SOMA

Provider ID: 205377

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

GASTROENTEROLOGY

KUO, SELENA

Provider ID: 313479
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

KUO, SELENA
Provider ID: 313476
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 313612
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

NOUREDDIN, NABIL
Provider ID: 313615
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

POLK, DAVID
Provider ID: 275449
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
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 304178
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

SHAH, SHAILJA
Provider ID: 283896
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

TSAI, MATTHEW
Provider ID: 304196
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 304186
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

YOUSSEF, FADY
Provider ID: 300024
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

GENETICS CLINICAL

REIMERS, REBECCA
Provider ID: 294650
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GENETICS CLINICAL

REIMERS, REBECCA
Provider ID: 302348
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5840
Fax: (858) 966-8550
After Hours Phone: (858) 966-5840
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GENETICS MEDICAL

DELCAMPOCASANELLES, MIGUEL
Provider ID: 206013
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5840
Fax: (858) 966-4064
After Hours Phone: (858) 966-5840
Provider Gender: Male
NPI: 1598141475
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

GENETICS MEDICAL

NIEMI, ANNA-KAISA
Provider ID: 307094
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 268689
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE
Provider ID: 268691
Board Certified: No
COMMUNITY CARE IPA LLC
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Phone: (858) 278-9911
Fax: (858) 565-7324
After Hours Phone: (858) 278-9911
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
Provider ID: 268653
Board Certified: No
COMMUNITY CARE IPA LLC
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Phone: (858) 278-9911
Fax: (858) 565-7324
After Hours Phone: (858) 278-9911
Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
Provider ID: 268652
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: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEARING AID DEALER / SUPPLIER

GALLAGHER, JEFFERY
Provider ID: 317181
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: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM
Provider ID: 313024
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

AL-BANAA, KADHIM
Provider ID: 313023
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI
Provider ID: 303059
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, CHUNG-JIAH
Provider ID: 316056
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOUEIRI, MICHEL
Provider ID: 317410
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHOUEIRI, MICHEL
Provider ID: 317409
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

LEE, KAREN
Provider ID: 284165
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY
Provider ID: 301060
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1295153575
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

PAUL, MEGAN
Provider ID: 274499
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

HEMATOLOGY / ONCOLOGY

VU, PETER
Provider ID: 272716
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY
Provider ID: 273188
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU
Provider ID: 247585
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU
Provider ID: 247583
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 241953
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 245573
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 276671
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

WINTERS, KATHRYN
Provider ID: 317441
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 275068
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

FIRESTEIN, CATHERINE
Provider ID: 275387
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

HAMMOND, CHARLES
Provider ID: 278588
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

KUPELIAN, CHLOE
Provider ID: 310785
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

ALDOUS, JEANNETTE
Provider ID: 290420
Board Certified: No
IHP OF SOUTHERN CAL-PHP
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-6384
After Hours Phone: (619)

662-4100
Provider Gender: Female
NPI: 1073650339
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

DEISS, ROBERT
Provider ID: 258330
Board Certified: No
UCSD MEDICAL GROUP
- 4168 FRONT ST FL 3
  SAN DIEGO, CA 92103
- *Phone: (619) 543-3995*
- *After Hours Phone: (619) 543-3995*

Provider Gender: Male
NPI: 1194977652
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Portuguese, Spanish*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

INFECTIOUS DISEASE

HORTON, LUCY
Provider ID: 240887
Board Certified: No
UCSD MEDICAL GROUP
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- *Phone: (800) 926-8273*
- *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1427324821
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

INFECTIOUS DISEASE

MARTIN, THOMAS
Provider ID: 277225
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

MARTIN, THOMAS
Provider ID: 277226
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INFECTIOUS DISEASE

MOODLEY, AMARAN
Provider ID: 208558
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

PANNARAJ, PIA
Provider ID: 301026
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA
Provider ID: 299946
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

INFECTIOUS DISEASE

WILKIN, TIMOTHY
Provider ID: 311164
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1740334978
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

ARUTYUNOV, BORIS
Provider ID: 201910
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-9186
After Hours Phone: (619) 471-9186
Provider Gender: Male
NPI: 1144562703
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BALL, SHELDON
Provider ID: 294137
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
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM

SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BALL, SHELDON
Provider ID: 294136
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: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BARRIOLA RUBARTH, RODRIGO
Provider ID: 311570
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1336729979
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA
Provider ID: 273983
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
NPI: 1801184973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CACHAY, EDWARD
Provider ID: 317402
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CHENG, GEORGE
Provider ID: 247639
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DEISS, ROBERT
Provider ID: 316718
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA
Provider ID: 286668
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FEUVRIER, ARIANA
Provider ID: 316161
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

FOX, SUTTON
Provider ID: 313474
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO
Provider ID: 286344
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO
Provider ID: 286343
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

GUPTA, VINEET
Provider ID: 313695
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: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

HASTIE, ELIZABETH
Provider ID: 291431
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

HOGARTH, MICHAEL
Provider ID: 214386
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

IBARRA, ALLISON
Provider ID: 312685
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

JABBOUR, MOUSSA
Provider ID: 256659
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KATZ, YISRAEL
Provider ID: 272936
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA
Provider ID: 274003
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS
Provider ID: 238622
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL
Provider ID: 274411
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LAM, MICHAEL
Provider ID: 274410
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LETENDRE, SCOTT
Provider ID: 317448
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: 1588696660
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

LEVERONE, NICHOLAS
Provider ID: 272692
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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MAJITHIA, AMIT
Provider ID: 255882
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801091459
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MARINO, NIKOLAS
Provider ID: 313525
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

MUNCE, DANIELLE
Provider ID: 272577
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: 1740644509
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NGUYEN, MICHELLE
Provider ID: 311483
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407367618
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOKES, BRANDON
Provider ID: 287582
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: 1487040051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

NOVIKOV, YEVGENY
Provider ID: 313732
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

INTERNAL MEDICINE

NGUYEN, MICHELLE
Provider ID: 311484
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NPI: 1144682428
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

PASCUA, RYAN
Provider ID: 312026
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Male
NPI: 1972064269
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

QURESHY, ZOYA
Provider ID: 317384
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SAHA, SRISHTI
Provider ID: 316141
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN
Provider ID: 273962
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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SIRIPHAND, CHRISTOPHER
Provider ID: 311445
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SMITH, CHELSEY
Provider ID: 239920
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

TAYLOR, DAVID
Provider ID: 274469
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

THOMAS, ROBERT
Provider ID: 238929
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

TRAN, HAO
Provider ID: 313745
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WAGNER, GABRIEL
Provider ID: 317439
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: 1992962245
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA
Provider ID: 259535
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259534
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WEBSTER, LUKE
Provider ID: 272681
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: 1235660887
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

WONG, JUSTIN
Provider ID: 313599
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 283026
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 283027
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

YOUNG, MAILE
Provider ID: 317419
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: 1093904997
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

ZHANG, SHERRY
Provider ID: 272657
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AFSHAR, KAMYAR

Provider ID: 311561
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
NPI: 1407050669
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AKUTHOTA, PRAVEEN
Provider ID: 311490
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
NPI: 1396704698
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

AKUTHOTA, PRAVEEN
Provider ID: 311491
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 2
SAN DIEGO, CA 92121
Phone: (855) 355-5864
Fax: (858) 657-6171
After Hours Phone: (855) 355-5864
Provider Gender: Male
NPI: 1396704698
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BARNES, LAURA
Provider ID: 312185
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BARNES, LAURA
Provider ID: 312184
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: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 210825
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 276291
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR STE 3-313
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093791014
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 276290
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 284704
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800) 926-5273
Provider Gender: Female
NPI: 1750317251
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 284706
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA
Provider ID: 284705
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800) 926-5273
Provider Gender: Female
NPI: 1750317251
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

CROUCH, DANIEL
Provider ID: 313726
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

DEWOLF, SEAN
Provider ID: 311453
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

HEPOKOSKI, MARK
Provider ID: 311546
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

IBRAHIM, ISLAM
Provider ID: 311489
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1962586917
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, LONG BEACH MEMORIAL MED CTR, TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

JOHN, MIRA
Provider ID: 311591
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013448588
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

JOHN, MIRA
Provider ID: 311590
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013448588
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

KAMDAR, BIREN
Provider ID: 311452
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 311557
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1699979591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 311559
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

LIN, CHRISTINE
Provider ID: 311558
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271467
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271466
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992141428
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ODISH, MAZEN
Provider ID: 271469
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: 1992141428
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ORR, JEREMY
Provider ID: 311524
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

ORR, JEREMY
Provider ID: 311525
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

PAGE, BRADY
Provider ID: 313677
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: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 271939
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851682728
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
GERIATRIC MEDICINE

AGNIHOTRI, PARAG
Provider ID: 247292
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
Provider ID: 313659
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ADLER, ERIC
Provider ID: 313660
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 313672
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 312692
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, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

ANG, LAWRENCE
Provider ID: 313696
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851529879
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN
Provider ID: 313662
Board Certified: No

UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831553718
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

BUI, QUAN
Provider ID: 310076
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 312737
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: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 313324
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1457770240
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 300061
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: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

GUPTA, TRIPTI
Provider ID: 316200
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

KRUMMEN, DAVID
Provider ID: 313714
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
Provider ID: 312994
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

LACHARITE-ROBERGE, ANNE-SOPHIE
Provider ID: 312995
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 311577
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, GARY
Provider ID: 313301
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: 1437503208
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MA, JANET
Provider ID: 314387
Board Certified: No
UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1922454396
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MAHMUD, EHTISHAM
Provider ID: 313738
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730112335
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 309250
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN
Provider ID: 245577
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

REEVES, RYAN
Provider ID: 313686
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548440902
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 309096
Board Certified: No
COMMUNITY CARE IPA LLC
412 WASHINGTON ST
SAN DIEGO, CA 92103
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 296050
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: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 295844
Board Certified: No
IHP OF SOUTHERN CAL-PHP
292 EUCLID AVE STE 210

SAN DIEGO, CA 92114
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

TORRES BARBA, DAVID
Provider ID: 312707
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE
SAN DIEGO, CA 92101
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447612676
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

UREY, MARCUS
Provider ID: 313733
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS
Provider ID: 313294
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

LICENSED PROFESSIONAL CLINICAL COUNSELOR

GARCIA, JENNI
Provider ID: 299310
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (619) 662-4100
Fax: (619) 662-4119
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1437775863
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY
Provider ID: 239584
Board Certified: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Provider Gender: Female
NPI: 1356846349
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY
Provider ID: 316123
Board Certified: No
UCSD MEDICAL 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: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA
Provider ID: 277179
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710

Provider Gender: Female
NPI: 1992149447
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA
Provider ID: 272670
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
- 3003 HEALTH CENTER DR
  SAN DIEGO, CA 92123
- *Phone: (858) 966-6710*

Fax: (858) 966-6711
- *After Hours Phone: (858) 966-6710*

Provider Gender: Female
NPI: 1992149447
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 300012
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
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 300010
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI
Provider ID: 300011
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317397
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317393
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317395
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317396
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317401
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317394
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

GHEBRENDRIAS, SELEMAWIT
Provider ID: 317400
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE
Provider ID: 208640
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296994
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296990
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296998
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 220
SAN DIEGO, CA 92123
Phone: (858) 966-6710
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

MELBER, DORA
Provider ID: 296989
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 430
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 312712
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265686794
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 312713
Board Certified: No
UCSD MEDICAL GROUP
4910 DIRECTORS PL
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265686794
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

NHAN-CHANG, CHIA-LING
Provider ID: 312711
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265686794
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294647
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA
Provider ID: 294648
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 220
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710

Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 277314
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE
Provider ID: 214436
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE
Provider ID: 277304
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)

966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE
Provider ID: 277307
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

SHANNON, KELLI
Provider ID: 208474
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1922156397
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 242522

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 277353

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 287084

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD
Provider ID: 209253
Board Certified: No
UCSD MEDICAL GROUP
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497713846
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 283285
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1528454188
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE
Provider ID: 205727
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

DEL ROSARIO, PAMELA
Provider ID: 295000
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH
Provider ID: 205645
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

GLENN, TARA
Provider ID: 283159
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA
Provider ID: 294251
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1245617489
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE
Provider ID: 205941
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1093886855
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE
Provider ID: 242881
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, PIONEERS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

LANE, BRIAN
Provider ID: 205707
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1427129287
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL
Provider ID: 205630
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1003028416
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 310508
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
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 297974
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 299894
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
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA
Provider ID: 297975
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

MCCULLEY, DAVID
Provider ID: 277177
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1235304155
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA
Provider ID: 262157
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1497941397
Provider English Spoken: Y
Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 260-7107

After Hours Phone: (619) 260-7107

Provider Gender: Female

NPI: 1497941397

Provider English Spoken: Y

Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301822

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301819

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

Network

NEONATAL / PERINATAL MEDICINE

ODONNELL, F

Provider ID: 205578

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

PHAM, BETTY

Provider ID: 310310

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-3759

Fax: (619) 543-3812

After Hours Phone: (619) 543-3759

Provider Gender: Female

NPI: 1790217750

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206171

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-3759

Fax: (619) 543-3812

After Hours Phone: (619) 543-3759

Provider Gender: Female

NPI: 1649433103

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303906

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303904

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858) 966-5888

Provider Gender: Male

NPI: 1538388988

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 206126

Board Certified: No

RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 966-7483
After Hours Phone: (858) 966-5888
Provider Gender: Male
NPI: 1801978143
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY
Provider ID: 206182
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

WEST, JULIE
Provider ID: 297073
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1811151848
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: Rady Childrens Health Network

NEPHROLOGY

RIFKIN, DENA

Provider ID: 311457

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6248

After Hours Phone: (619) 543-6248

Provider Gender: Female

NPI: 1578519203

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NEPHROLOGY

SINGH, PRABHLEEN

Provider ID: 311033

Board Certified: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1235207234

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

NEPHROLOGY

ZHONG, YAN

Provider ID: 296053

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEPHROLOGY

ZHONG, YAN

Provider ID: 296054

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEUROLOGY

BUI, JONATHAN
Provider ID: 303227
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: 1730247974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

BUI, JONATHAN
Provider ID: 206005
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

DOVE, KATHERINE
Provider ID: 302784
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL

4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1033642574
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

DUNN-PIRIO, ANASTASIE
Provider ID: 304160
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

DUNN-PIRIO, ANASTASIE
Provider ID: 203235
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781
After Hours Phone: (619) 543-3500
Provider Gender: Female
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GHOLIPOUR, TAHA
Provider ID: 311496
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GHOLIPOUR, TAHA
Provider ID: 311495
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

GOLD, JEFFREY
Provider ID: 283335
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GOLD, JEFFREY
Provider ID: 303287
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
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GUIDO-ESTRADA, NATALIE
Provider ID: 303271
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL

4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1528353521
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

GUNDOGDU, MELEK
Provider ID: 201623
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
After Hours Phone: (619) 543-3500
Provider Gender: Female
NPI: 1437253671
Provider English Spoken: Y
Provider Language(s) Spoken: Turkish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

HANNAWI, ANDREW
Provider ID: 283154
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
NPI: 1194179135
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

HEADLEY, ALISON
Provider ID: 311598
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

HEADLEY, ALISON
Provider ID: 311599
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ILICETO, ALESSANDRO
Provider ID: 313506
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE
Provider ID: 304154
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

IRAGUIMADOZ, VICENTE
Provider ID: 311468
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 311185
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 311184
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

JACQUES, KAYLA
Provider ID: 311186
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA
Provider ID: 311523
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KANSAL, LEENA
Provider ID: 311521
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

KHAMISHON, BORIS
Provider ID: 269923
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

NEUROLOGY

KIM MCMANUS, OLIVIA
Provider ID: 303229
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

LAVERTY, CHAMINDRA
Provider ID: 303258
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1538320395
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

LEE, DAVID
Provider ID: 304198
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID
Provider ID: 246263
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID
Provider ID: 311572
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE
Provider ID: 268346
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE
Provider ID: 304197
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

MAHTA, ALI
Provider ID: 314332
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

PASSIAK, BRITTANY

Provider ID: 311209

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

NEUROLOGY

PASSIAK, BRITTANY

Provider ID: 311208

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1467949693

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284370

Board Certified: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121

Phone: (619) 294-3746

Fax: (888) 539-8781

After Hours Phone: (619) 294-3746

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI

Provider ID: 304161

Board Certified: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1093178220
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: French*

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA
Provider ID: 304200
Board Certified: No
UCSD MEDICAL GROUP
- 6655 ALVARADO RD
  SAN DIEGO, CA 92120
- *Phone: (800) 926-8273*

Fax: (888) 539-8781
- *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1568655264
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Russian*

Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA
Provider ID: 285968
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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 311473
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

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 311472
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: 1790774156
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SHIH, JERRY
Provider ID: 311470
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

SWEAT, MARIE
Provider ID: 303831
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

TECOMA, EVELYN
Provider ID: 311535
Board Certified: Yes
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174556518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

TECOMA, EVELYN
Provider ID: 311533
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

UNG, HOAMENG
Provider ID: 311433
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

WU, VICTORIA
Provider ID: 313037
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

YANG, JENNIFER
Provider ID: 301593
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

ZALE, CHELSEA
Provider ID: 313034
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ZALE, CHELSEA
Provider ID: 313033
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ZALE, CHELSEA
Provider ID: 313035
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

ZIMBRIC, MICHAEL
Provider ID: 206272
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY

ZIMBRIC, MICHAEL
Provider ID: 303284
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GRAVES, JENNIFER
Provider ID: 261037
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1992849863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSF MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE
Provider ID: 205825
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1528353521
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

NEUROLOGY CHILD

PASSIAK, BRITTANY
Provider ID: 314344
Board Certified: No
UCSD MEDICAL GROUP
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1467949693
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 314373
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM
Provider ID: 314372
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

NUCLEAR MEDICINE

CHEHABI, HAZEM

Provider ID: 314371
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311189
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311190
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311191
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI

Provider ID: 311192
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): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 311193
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ASHAK, DANI
Provider ID: 316164
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

BIVER, LAURA
Provider ID: 316147
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 290731
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291329
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291330
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291326
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: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291327
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 291328
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA
Provider ID: 316018
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291339
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291340
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291337
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 291338
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY
Provider ID: 316026
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FERRANDO, CECILE
Provider ID: 311105
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255592325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

FRUGONI, GINA
Provider ID: 270056
Board Certified: No
COMMUNITY CARE IPA LLC
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (619) 400-5074
After Hours Phone: (619) 400-5074
Provider Gender: Female
NPI: 1578729315
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 313593
Board Certified: No
UCSD MEDICAL GROUP
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427686930
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 313595
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 313597
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 313596
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: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GREINER, KAREN
Provider ID: 316128
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427686930
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN
Provider ID: 296002
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 278915
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT
Provider ID: 278917
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
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN
Provider ID: 205481
Board Certified: 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: CONTACT PROVIDER
Hours: M-TH 8:30AM-4:30PM F 8:30AM-2PM
Website: N/A
IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 285519
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 208681
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
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN
Provider ID: 200965
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1770702177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303064

Board Certified: No

UCSD MEDICAL GROUP

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 316180

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA

Provider ID: 311112

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

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA

Provider ID: 311113

Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 311114
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 311115
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 311116
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MCKINNEY, SARA
Provider ID: 316057
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA
Provider ID: 285741
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA
Provider ID: 285742
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA
Provider ID: 299922
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA
Provider ID: 299921
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

MESINA, OMAR
Provider ID: 316114
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: 1609403070
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA
Provider ID: 313548
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548897770
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

NUTAITIS, ALEXANDRA
Provider ID: 313546
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548897770
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

QENDRO, ISABELLA
Provider ID: 316086
Board Certified: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY STE 200
SAN DIEGO, CA 92130
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1285261602
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE
Provider ID: 284298
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295263861
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285174
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285176
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

VARON, SHIRA
Provider ID: 316167
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

CROSS, JOHN
Provider ID: 255322
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

KIM, JOHN
Provider ID: 255385
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE
Provider ID: 206549
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: 1669770939
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206548

Board Certified: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

JEFFERIES, KATHLEEN

Provider ID: 311346

Board Certified: No

UCSD MEDICAL GROUP

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144410648

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

LARSEN, JULIE

Provider ID: 258359

Board Certified: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-1809

After Hours Phone: (855) 543-0333

Provider Gender: Female

NPI: 1497009179

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

SHELTON, ALYSSA

Provider ID: 258415

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

ALLEN, RACHAEL
Provider ID: 315301
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

ALLEN, RACHAEL
Provider ID: 315303
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3939 3RD AVE
SAN DIEGO, CA 92103
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Female
NPI: 1801275391
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

BANSAL, PREETI
Provider ID: 205620
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

BAXTER, SALLY
Provider ID: 272788

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

BAXTER, SALLY
Provider ID: 272789
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 240636
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: 1104237353
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

CAMP, ANDREW
Provider ID: 260020
Board Certified: 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: 1326300377
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 313681
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

CHENG, SARAH
Provider ID: 313685
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 313496
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GIRKIN, CHRISTOPHER
Provider ID: 313499
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER
Provider ID: 252313
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 297011
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HENNEIN, LAUREN
Provider ID: 297009
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 313719
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HOYT, BRIGGS
Provider ID: 313716
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HSUEH, JESSICA
Provider ID: 313694
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

HUYNH, PAUL
Provider ID: 245200
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

HUYNH, PAUL
Provider ID: 295645
Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

IHP OF SOUTHERN CAL-PHP
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone: (619) 283-1303
Provider Gender: Male
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPHTHALMOLOGY

KHATIB, NORA
Provider ID: 305375
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

KLINE, LANNING
Provider ID: 239915
Board Certified: No
UCSD MEDICAL GROUP
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1841227477
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

LI, ALEXANDRIA
Provider ID: 272833
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

NPI: 1841652864
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

LIU, YUNXIANG
Provider ID: 210803
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1770849804
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOLL, ANGELA
Provider ID: 205510
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 216412
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
After Hours Phone: (858) 309-7702
Provider Gender: Male

NPI: 1497792220
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 311099
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

NAYER, ZACHARIA
Provider ID: 311098
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

OHALLORAN, HENRY
Provider ID: 205888
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 313539
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PETERSON, JONATHAN
Provider ID: 314350
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

PUIG LLANO, MANUEL
Provider ID: 299964
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: 1427102979
Provider English Spoken: Y
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL
Provider ID: 313582
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285262568
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

VAIL, DANIEL
Provider ID: 313579
Board Certified: No
UCSD MEDICAL GROUP
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285262568
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPHTHALMOLOGY

YAMADA, KENTARO
Provider ID: 295848
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1040 UNIVERSITY AVE STE B209A
SAN DIEGO, CA 92103
Phone: (619) 299-1100
Fax: (619) 299-7156
After Hours Phone: (619) 299-1100
Provider Gender: Male
NPI: 1629047188
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 311884
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

YAMANE, MAYA
Provider ID: 311886
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

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OPTOMETRIST

DUONG, NGHI
Provider ID: 314752
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5330 CARROLL CANYON RD STE 210
SAN DIEGO, CA 92121
Phone: (858) 450-1010
Fax: (858) 450-9451
After Hours Phone: (858) 450-1010
Provider Gender: Female
NPI: 1285832501
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

DUONG, NGHI
Provider ID: 314750
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: 1285832501
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 304156
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

JOMOC, CAITLIN
Provider ID: 304155
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

KIM, PHILIP
Provider ID: 287910
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

SCHWAB, GARY
Provider ID: 290410
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

SCHWAB, GARY
Provider ID: 290411
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

VO, ANDREW
Provider ID: 201312
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

VO, ANDREW
Provider ID: 304147
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 301683
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 301680
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OPTOMETRIST

YU, CAROL
Provider ID: 301684
Board Certified: No
UCSD MEDICAL GROUP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

ORAL MAXILLOFACIAL SURGEON

DENTICO-OLIN, MARC
Provider ID: 304727
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

ORAL MAXILLOFACIAL SURGEON

DENTICO-OLIN, MARC
Provider ID: 273663
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
501 WASHINGTON ST STE 710
SAN DIEGO, CA 92103
Phone: (619) 295-6774
Fax: (619) 295-6776
After Hours Phone: (619) 295-6774
Provider Gender: Male
NPI: 1629205174
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

BLISS, MORGAN
Provider ID: 272565
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299462
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299461
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH
Provider ID: 299457
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CARVALHO, DANIELA
Provider ID: 272557
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CARVALHO, DANIELA
Provider ID: 205628
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

CATES, DANIEL
Provider ID: 311486
Board Certified: No
UCSD MEDICAL GROUP
9333 GENESEE AVE
SAN DIEGO, CA 92121
Phone: (858) 657-8590
Fax: (888) 539-8781
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1821352907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

CHANG, EDWARD
Provider ID: 309535
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1528146008
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299583
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299579
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299582
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299567
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299569
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299568
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

FRANK, ETHAN
Provider ID: 310278
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: 1720584345
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

FRIESEN, TZYYNONG
Provider ID: 272604
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: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299560
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299559
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH
Provider ID: 299561
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298396
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: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 298397
Board Certified: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

GREENE, JACQUELINE
Provider ID: 272959
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: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 299576
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY
Provider ID: 299575
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 299514
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 299511
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HOM, DAVID
Provider ID: 299515
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB
Provider ID: 301052
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

HUSSEMAN, JACOB
Provider ID: 301053
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

JIANG, WEN
Provider ID: 272660
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 299446
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 299443
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 299445
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH WHITTIER HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

OTOLARYNGOLOGY

LEUIN, SHELBY
Provider ID: 272637
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 299592
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 299591
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO
Provider ID: 299590
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

PATEL, VIJAY
Provider ID: 297037
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

QIAN, ZHEN
Provider ID: 311002
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 299509
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 299508
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW
Provider ID: 299507
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 299641
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 299639
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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WATSON, DEBORAH
Provider ID: 299642
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299615
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299614
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP
Provider ID: 299610
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 298412
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 298414
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

YAN, CAROL
Provider ID: 298413
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
Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

FADARE, OLUWOLE
Provider ID: 275705
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

HANSEN, LAWRENCE
Provider ID: 275767
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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA
Provider ID: 275888
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1629163100
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD
Provider ID: 243202
Board Certified: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275084295
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO
Provider ID: 313291
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH
Provider ID: 275756
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
Provider ID: 275720
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BROOME, HELEN
Provider ID: 275721
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 247581
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 247580
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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

MCKNIGHT, TRISTAN
Provider ID: 311761
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES
Provider ID: 275826
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED
Provider ID: 275781
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679521579
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

SONG, WEI
Provider ID: 300001
Board Certified: No
UCSD MEDICAL GROUP

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1306164157
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

STEPHENS, LAURA
Provider ID: 300042
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA
Provider ID: 275789
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

WANG, DEHUA
Provider ID: 289153
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

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PATHOLOGY CLINICAL

KELNER, MICHAEL
Provider ID: 247602
Board Certified: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174679849
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL
Provider ID: 247601
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174679849
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PEDIATRIC ALLERGY / IMMUNOLOGY

ALKATIB, RHONDA
Provider ID: 291226
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 205824
Board Certified: No

RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5961
After Hours Phone: (858) 966-5961
Provider Gender: Male
NPI: 1356570758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 205823
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (858) 292-1144
After Hours Phone: (858) 292-1144
Provider Gender: Male
NPI: 1356570758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER
Provider ID: 205697
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (858) 966-4900
After Hours Phone: (858) 966-4900
Provider Gender: Male
NPI: 1609801299
Provider English Spoken: Y
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-12PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY
Provider ID: 205724
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY
Provider ID: 314178
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5961
After Hours Phone: (858) 966-5961
Provider Gender: Male
NPI: 1861666919
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY
Provider ID: 205725
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-5961
After Hours Phone: (858) 966-5961
Provider Gender: Male
NPI: 1861666919
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

BOCK, MATTHEW
Provider ID: 280463
Board Certified: 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\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO
Provider ID: 284120
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1114277787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

CHAU, PETER
Provider ID: 271427
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1407146947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER
Board Certified: 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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN
Provider ID: 260595
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

GOLDING, IAN
Provider ID: 210823
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

GORDON, BRENT
Provider ID: 295391
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA
Provider ID: 205687
Board Certified: No
RADY CHILDRENS HEALTH

NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1023329885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

JUSTINO, HENRI
Provider ID: 284123
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1518036821
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LASALLE, ELIZABETH
Provider ID: 313252
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1235634015
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

LEHNERT SCHUCHARDT, ELEANOR
Provider ID: 262250
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL
Provider ID: 206147
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-4912
Fax: (858) 966-7903
After Hours Phone: (858) 966-4912
Provider Gender: Female
NPI: 1487821815
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

NARAYAN, HARI
Provider ID: 205349
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1376705707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE
Provider ID: 206297
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1417222472
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRIC CARDIOLOGY

STEINBERG, LEONARD

Provider ID: 248208

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1538279484

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

VAUGHN, GABRIELLE

Provider ID: 205643

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700

Fax: (858) 966-7423

After Hours Phone: (858) 576-1700

Provider Gender: Female

NPI: 1891004461

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

WANG-GIUFFRE, ELIZABETH

Provider ID: 315246

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1265797591

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 206287

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

YOUNOSZAI, ADEL
Provider ID: 303133
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: 1952493819
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN
Provider ID: 283142
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
NPI: 1295198091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN
Provider ID: 303679
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 304918

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1851927883

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303780

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

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ALAYARI, AMETHYST

Provider ID: 311382

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: 1740778653

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health

Network

PEDIATRIC EMERGENCY MEDICINE

AMIRNOVIN, RAMBOD

Provider ID: 297673

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: 1629104492

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, LONG BEACH MEMORIAL MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

AUSTIN-PAGE, LUKAS

Provider ID: 205589

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1609281450

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

BRYL, AMY
Provider ID: 205967
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
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: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CAMPBELL, SARA
Provider ID: 206335
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN
Provider ID: 296535
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN
Provider ID: 296536
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CONRAD, HEATHER
Provider ID: 205960
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL
Provider ID: 311159
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Male
NPI: 1336727791
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CRAWFORD, MICHAEL
Provider ID: 311158
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1336727791
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEL RE, ANGELO
Provider ID: 206081
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE
Provider ID: 288572
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1366622078
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\18

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE
Provider ID: 287393
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: 1750513644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

DONOFRIO-ODMANN, JOY
Provider ID: 205375
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: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

EKPENYONG, ATIM
Provider ID: 205722
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

FISHER, JAY
Provider ID: 295690
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1629118518
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA
Provider ID: 275784
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1316162324
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

HERSKOVITZ, SCOTT
Provider ID: 261045
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ISHIMINE, PAUL

Provider ID: 206236
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1437184421
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KHAN, SHAHFAR

Provider ID: 294094
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1013361815
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302317
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

KRAK, MICHAEL
Provider ID: 310975
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1063094225
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 248071
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
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE
Provider ID: 246901
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PEDIATRIC EMERGENCY MEDICINE

MCEVOY, ANNE
Provider ID: 310789
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL
Provider ID: 295668
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN
Provider ID: 275654
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1528483955
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY
Provider ID: 205348

Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1073740205
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID
Provider ID: 302146
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1194145946
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MURRAY, MATTHEW
Provider ID: 205759
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1215103023
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MARGARET
Provider ID: 270705
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MYLINH
Provider ID: 262299
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1730428053
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI
Provider ID: 287923
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1265867683
Provider English Spoken: Y
Provider Language(s) Spoken: Turkish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PADE, KATHRYN
Provider ID: 262411
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN
Provider ID: 302352
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD
Provider ID: 295457
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE
Provider ID: 311083
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: 1477626513
Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE
Provider ID: 205784
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: 1477626513
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA
Provider ID: 216970
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ROBERTS, CALE
Provider ID: 310782
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL
Provider ID: 301249
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL
Provider ID: 301250
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
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SALEH, FAREED
Provider ID: 206216
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1366691115
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE
Provider ID: 243830
Board Certified: 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 INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY
Provider ID: 284168
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1992202964
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA
Provider ID: 248171
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
Provider ID: 301636
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
Provider ID: 301635
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TAMAS, VANESSA
Provider ID: 206212
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Female
NPI: 1326225368
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

TANG, ANDREW

Provider ID: 294677

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1184071516

Provider English Spoken: Y

Cultural Competency: N

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302800

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA

Provider ID: 301834

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Network

PEDIATRIC EMERGENCY MEDICINE

ULRICH, STACEY
Provider ID: 205847
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205811
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205809
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: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAN WOY, LAUREN
Provider ID: 301574
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VANE, JACKSON
Provider ID: 205883
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VAYNGORTIN, TATYANA
Provider ID: 263012
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

VEGA, CAROLINA
Provider ID: 310690
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1427442086
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

WANG, VINCENT
Provider ID: 309661
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

WANG, YVETTE
Provider ID: 263416
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

YAPHOCKUN, KAREN KIM
Provider ID: 206184
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: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

ARAFAH, DEEMA
Provider ID: 310289
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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

CYMBALUK, ANNA
Provider ID: 294214
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
- 3030 CHILDRENS WAY STE 4
  SAN DIEGO, CA 92123
- *Phone: (858) 966-4032*

Fax: (858) 966-6227
- *After Hours Phone: (858) 966-4032*

Provider Gender: Female
NPI: 1043674849
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

PATTERSON, MARY
Provider ID: 206059
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
- 3030 CHILDRENS WAY FL 4 NORTH
  SAN DIEGO, CA 92123
- *Phone: (858) 966-4032*

Fax: (858) 966-6227
- *After Hours Phone: (858) 966-4032*

Provider Gender: Female
NPI: 1912112020
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

RANADIVE, SAYALI
Provider ID: 311394
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA
Provider ID: 302818
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1841721172
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

VARGAS TRUJILLO, MARCELA
Provider ID: 205605
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-4032
After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1952534091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301639

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW

Provider ID: 310617

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

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

DICKERSON, ANDREW

Provider ID: 310619

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

GOYAL, NIDHI

Provider ID: 205598

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

HARTMANN, PHILLIPP
Provider ID: 294228
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

JAZAYERI, AMIR
Provider ID: 310952
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Male
NPI: 1316385925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

KATIBIAN, DAVID
Provider ID: 310954
Board Certified: No
RADY CHILDRENS HEALTH NETWORK

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

LIN, TOM
Provider ID: 297707
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Male
NPI: 1114136934
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SCHWARZ, KATHLEEN
Provider ID: 205885
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1265465918
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

SHARMA, ANITA
Provider ID: 311774
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

YOUNG, JOCELYN
Provider ID: 294675
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1306227491
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

BRIGGS, BENJAMIN
Provider ID: 274689
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

CHOO, SUN
Provider ID: 206115
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ELSTER, JENNIFER
Provider ID: 205769
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA
Provider ID: 205882
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1982091740
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE
Provider ID: 296760
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1396942470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

KUO, DENNIS
Provider ID: 205433
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, KINCHEON
Provider ID: 311644
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1154095990
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, HOJUN
Provider ID: 307300
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1730455239
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

LIOU, ANGELA
Provider ID: 310982
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

SRIDHAR, SUNITA
Provider ID: 302088
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

WON, ERIC
Provider ID: 315228
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1497192710
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR
Provider ID: 206149
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)

966-5811
Provider Gender: Male
NPI: 1154692473
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA
Provider ID: 301583
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1881127736
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, JENNIFER
Provider ID: 206148
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ZAGE, PETER
Provider ID: 206315
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY STE 2W
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1912003161
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND
Provider ID: 289138
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Male
NPI: 1760460026
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 312985
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 312987
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: 1689036436
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

CRANE, CLARKSON
Provider ID: 311377

Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8574
Fax: (858) 966-7789
After Hours Phone: (858) 966-8574
Provider Gender: Male
NPI: 1689036436
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC NEPHROLOGY

EPPERSON, KATRINA
Provider ID: 312257
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8574
Fax: (858) 966-7789
After Hours Phone: (858) 966-8574
Provider Gender: Female
NPI: 1427435825
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

EPPERSON, KATRINA
Provider ID: 312256
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

INGULLI, ELIZABETH
Provider ID: 302778
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY STE 28
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858)

966-8052
Provider Gender: Female
NPI: 1811919244
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

PERENS, ELLIOT
Provider ID: 302765
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Male
NPI: 1922328947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

RASCHKE, ROBIN
Provider ID: 310300
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

AKONG, KATHRYN
Provider ID: 205673
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1912169061
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH
Provider ID: 246060
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Male
NPI: 1588781173
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH
Provider ID: 205950
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 243042
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1871752451
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA
Provider ID: 243041
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1871752451
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

FINCH, CHRISTINA
Provider ID: 302581
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1598255325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRIC PULMONOLOGY

FIREIZEN, YARON
Provider ID: 302329
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1699123927
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, LONG BEACH MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, JEREMY
Provider ID: 284176
Board Certified: No

RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1255750360
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, JEREMY
Provider ID: 284177
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1255750360
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 294641
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA
Provider ID: 206123
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1649222340
Provider English Spoken: Y

Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA
Provider ID: 206124
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-5847
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1649222340
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RYU, JULIE
Provider ID: 206218
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-5847
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1568533321
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

TANTISIRA, KELAN
Provider ID: 277183
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):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA
Provider ID: 246394
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8082
After Hours Phone: (858) 966-8082
Provider Gender: Female
NPI: 1821242199
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

LEVY, AVIYA
Provider ID: 310780
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-8082
Fax: (858) 966-6791
After Hours Phone: (858) 966-8082
Provider Gender: Female
NPI: 1144726936
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY

PHADKE, OMKAR
Provider ID: 315124
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

ALAGIRI, MADHU
Provider ID: 206387
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

ANDREE, GREGOR
Provider ID: 293219
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

ANDREE, GREGOR
Provider ID: 293220
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

BEAUCHAMP-WALTERS, JULIA
Provider ID: 270063
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: CONTACT

PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CAMERON, MELISSA
Provider ID: 205965
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CANTU, ALICIA
Provider ID: 205752
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CANTU, ALICIA
Provider ID: 205753
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

CHONG, AMY
Provider ID: 259993
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

DOAN STEPHENS, CRYSTAL
Provider ID: 293274
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOAN STEPHENS, CRYSTAL
Provider ID: 293275
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOSHI, AMI
Provider ID: 205329
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network

PEDIATRICS

DOSHI, AMI

Provider ID: 205330

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

EARLEY, SAMANTHA

Provider ID: 311738

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 DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

GRAY, SARAH

Provider ID: 284224

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1508210311

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRICS

HUANG, MARIA

Provider ID: 205974

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1770841140
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

JIMENEZ BACARDI, ADRIA
Provider ID: 294640
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

JINDAL, ANUJA
Provider ID: 303285
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

KHARE, MANASWITHA
Provider ID: 206289
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1912345307
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

LEE, BEGEM
Provider ID: 205923
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

LOPEZ, XIMENA
Provider ID: 302856
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

MANNINO AVILA, ELIZABETH
Provider ID: 262161
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1164747127
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

MILLS, TATYANA
Provider ID: 310307
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

MILLS, TATYANA
Provider ID: 310308
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI

Provider ID: 302113
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

NGO, MAI

Provider ID: 302114
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PATEL, AARTI

Provider ID: 205865
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

PIERCE, HEATHER

Provider ID: 205701
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

POLICH, MICHELLE

Provider ID: 286390
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: 1780118018
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

POOLE, DAVID
Provider ID: 311153
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

RHEE, KYUNG
Provider ID: 206114
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

RIES, DAVID
Provider ID: 206082
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

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

RUNGVIVATJARUS, TIRANUN
Provider ID: 206319
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRICS

SAWYER, CAROLYN
Provider ID: 315877
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

PEDIATRICS

STOVER, LAURIE
Provider ID: 206196
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY
Provider ID: 287524
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195

SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN
Provider ID: 287453
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA
Provider ID: 287523
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1609017532
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY
Provider ID: 295276
Board Certified: No
IHP OF SOUTHERN CAL-PHP
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1407052459
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE
Provider ID: 287520
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE
Provider ID: 287519
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1336356203
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW
Provider ID: 287537
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1487635272
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY

Provider ID: 284763
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 923-8273
Fax: (888) 539-8781
After Hours Phone: (800) 923-8273
Provider Gender: Female
NPI: 1235653148
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ARMEEN, GARY
Provider ID: 247035
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1760774863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BERGEN, SOPHEA
Provider ID: 295518
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6719 ALVARADO RD STE 308
SAN DIEGO, CA 92120
Phone: (619) 265-7912
Fax: (619) 265-7922
After Hours Phone: (619) 265-7912
Provider Gender: Female
NPI: 1558300665
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

BOYD, LISA
Provider ID: 217649
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1871859421
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE
Provider ID: 255558
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407212376
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA
Provider ID: 257530
Board Certified: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

PHYSICIANS ASSISTANT

DERISSI, DANA
Provider ID: 301632
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

DU, SARAH

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 311792
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

DU, SARAH
Provider ID: 310603
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1295502763
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
Provider ID: 311549
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GEBAUER, HEATHER
Provider ID: 311550
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

GUTH, CARA

Provider ID: 299111
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HALTER, KENNETH
Provider ID: 317377
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 247206
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS
Provider ID: 287349
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HERNANDEZ, GABRIELA
Provider ID: 306325
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA
Provider ID: 287133
Board Certified: No
UCSD MEDICAL GROUP
203 W F ST
SAN DIEGO, CA 92101
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861624181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

HSIEH, STEPHANIE
Provider ID: 312497
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1720868045
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

LAMBERT, GAGE
Provider ID: 214788
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LEE, JENNIFER
Provider ID: 309998
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LINDEMANN, CHRISTINA
Provider ID: 283760
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 305026
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH
Provider ID: 280611
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MERRILL, COREY
Provider ID: 258040
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MOREO, HUNTER
Provider ID: 310136
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MOREO, HUNTER
Provider ID: 310726
Board Certified: No
COMMUNITY CARE IPA LLC
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858) 485-0554
Provider Gender: Female
NPI: 1043062334
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NAKAMITSU, ABIGAIL
Provider ID: 268666
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
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

NASSAR, JEANNE
Provider ID: 312724
Board Certified: No
UCSD MEDICAL GROUP
2131 3RD AVE
SAN DIEGO, CA 92101
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1760704761
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

NGUYEN, KHANH
Provider ID: 310050
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427312644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

NGUYEN, KHANH
Provider ID: 310049
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427312644
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 293444
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PELIO, DARREN
Provider ID: 293441
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 283586
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAULT, MARK
Provider ID: 283585
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 293247
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
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PHUNG, AIVI
Provider ID: 293246
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POGGI, SARA
Provider ID: 310631
Board Certified: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1265119911
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POGGI, SARA
Provider ID: 310614
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1265119911
Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

PRIEST, VIVIAN
Provider ID: 272430
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1225581754
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PRIEST, VIVIAN
Provider ID: 313298
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PYLE, ALEXANDRA
Provider ID: 297718
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

QUIJANO, GLENN
Provider ID: 307067
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Phone: (858) 571-3630
Fax: (858) 295-3948
After Hours Phone: (858) 571-3630

Provider Gender: Male
NPI: 1407466030
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

ROBERTS, AUDREY
Provider ID: 253253
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-7777
After Hours Phone: (619) 543-7777
Provider Gender: Female
NPI: 1265960256
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE
Provider ID: 302452
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SCHMITT, EVA
Provider ID: 264176
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER
Provider ID: 256639
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER
Provider ID: 256640
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER
Provider ID: 316727
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SCHULZ, STEFAN
Provider ID: 243419
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SERHAN, STEPHANIE

Provider ID: 312856

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SERHAN, STEPHANIE

Provider ID: 312857

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SHAPIRO, RACHEL

Provider ID: 311469

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SMITH, TREVOR

Provider ID: 313669

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 255913
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 311088
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: 1811069271
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 311091
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TAN, CARMELA
Provider ID: 311089
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 312694

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

THOMAS, THEA
Provider ID: 312695
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 299598
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 299600
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WAHLIN, TAMARA
Provider ID: 299599
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEBB, SHANNON
Provider ID: 305285
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 278203
Board Certified: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932494499
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE
Provider ID: 278201
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278200

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PODIATRIST

PANEK, JOHN

Provider ID: 317178

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PODIATRIST

PANEK, JOHN

Provider ID: 316926

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA

Provider ID: 293289

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 293290
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA
Provider ID: 303060
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER

SIETSMA, ALEXANDRA
Provider ID: 276908
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932522778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER

SIETSMA, ALEXANDRA

Provider ID: 276909

Board Certified: No

UCSD MEDICAL GROUP

200 W 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 293400

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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 290770

Board Certified: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1932292422

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203173

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BANKS, SARAH
Provider ID: 304195
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BANKS, SARAH
Provider ID: 203174
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

BASS, GURGIANA
Provider ID: 306550
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
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4:30PM
TU 8AM-12PM
W 8AM-4:30PM
TH 8AM-12PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

BASS, GURGIANA
Provider ID: 290752
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

CHESHER, NICHOLAS
Provider ID: 273811
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124539697
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

CLEMENT, LUIS
Provider ID: 290745
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FIRESTONE, MICHELLE
Provider ID: 290954
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FIRESTONE, MICHELLE
Provider ID: 290773
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FORZANI, CHRISTINA
Provider ID: 290780
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN
Provider ID: 294171
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN
Provider ID: 290801
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: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GOMEZ, JUANITA
Provider ID: 291424
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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 296237

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 290792

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: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

LANIOUS, OKSANA

Provider ID: 317403

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

MEIER, EMILY
Provider ID: 311351
Board Certified: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255530572
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

MONTOYA, JESSICA
Provider ID: 274619
Board Certified: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003421256
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

NORMAN, MARC
Provider ID: 276869
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

NORMAN, MARC
Provider ID: 272916
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

ORFF, HENRY
Provider ID: 273009
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

ORTIZ, MARIA
Provider ID: 290721
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

PRINCE, RENEE
Provider ID: 303603
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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: Community Care IPA LLC

PSYCHOLOGIST

RADOJEVIC, NATASHA
Provider ID: 306574
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
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

RADOJEVIC, NATASHA
Provider ID: 290690
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

REINEKE, ANKE
Provider ID: 315852
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6974
Fax: (858) 966-6721
After Hours Phone: (858) 966-6974
Provider Gender: Female
NPI: 1205154747
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PSYCHOLOGIST

REINEKE, ANKE
Provider ID: 315853
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8060 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-6974
Fax: (858) 966-6721
After Hours Phone: (858) 966-6974
Provider Gender: Female
NPI: 1205154747
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PSYCHOLOGIST

SALO, STEPHANIE

Provider ID: 307831

Board Certified: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619) 563-0250

Provider Gender: Female

NPI: 1477967784

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 17\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SCHELLINGER, KRISTON

Provider ID: 213752

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

SCHELLINGER, KRISTON

Provider ID: 213750

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

SCHELLINGER, KRISTON

Provider ID: 213751

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

TARLE, STEPHANIE
Provider ID: 303115
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

TO, TUAN
Provider ID: 290283
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
Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TO, TUAN
Provider ID: 290285
Board Certified: No
IHP OF SOUTHERN CAL-PHP
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TO, TUAN
Provider ID: 290284
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 5\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TWAMLEY, ELIZABETH
Provider ID: 290717
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
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM TH 8:30AM-9PM F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

VIETEN, CASSANDRA
Provider ID: 317381
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PSYCHOLOGIST

VIETEN, CASSANDRA
Provider ID: 317382
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PUBLIC HEALTH
PREVENTATIVE MEDICINE

SOZANSKI, JESSE
Provider ID: 200925
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 299924
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 299923
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

CYPRO, ALEXANDER
Provider ID: 313679
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

HOGAN, NICHOLAS
Provider ID: 313713
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA
Provider ID: 238062
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

JOSHUA, JISHA
Provider ID: 238061
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LE, HUAN
Provider ID: 27358
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: CONTACT PROVIDER

Hours: M-W 9AM-5PM
TH 8AM-1PM
F 9AM-6PM
SA 8AM-11AM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PULMONARY DISEASES

LE, HUAN
Provider ID: 300636
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: CONTACT PROVIDER
Hours: M-W 9AM-5PM
TH 8AM-1PM
F 9AM-6PM
SA 8AM-11AM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PULMONARY DISEASES

LI, JINGHONG
Provider ID: 311032
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

MCGUIRE, WILLIAM
Provider ID: 299986
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: 1841684081
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

PEARCE, ALEX
Provider ID: 300055
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265896856
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 303100
Board Certified: No
COMMUNITY CARE IPA LLC
7901 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (619) 740-8499
After Hours Phone: (858) 939-5010
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

CARMONA, RUBEN
Provider ID: 316385
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

COLEMAN, LORI
Provider ID: 221091
Board Certified: No
COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (858) 939-5021
After Hours Phone: (858) 939-5010
Provider Gender: Female
NPI: 1053348920

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

STRAKA, CHRISTOPHER
Provider ID: 276875
Board Certified: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
NPI: 1801281399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 17\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

TRINGALE, KATHRYN
Provider ID: 306883
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
9730 SUMMERS RIDGE RD STE 101
SAN DIEGO, CA 92121
Phone: (858) 345-2445
Fax: (858) 578-1144
After Hours Phone: (858) 345-2445
Provider Gender: Female
NPI: 1780172031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
Provider ID: 314062
Board Certified: 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: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIATION ONCOLOGY

VAKILIAN, SIAVOSH
Provider ID: 314064
Board Certified: No
IHP OF SOUTHERN CAL-PHP
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
Provider ID: 311196
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1376689778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ADAMS, STEPHEN
Provider ID: 311197
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, SAN LEANDRO HOSPITAL, UCSD MEDICAL CTR, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
Provider ID: 311084
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

AWWAD, REEM
Provider ID: 311085
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY
Provider ID: 269318
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY
Provider ID: 304163
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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

RADIOLOGY DIAGNOSTIC

BISSET, LOGAN
Provider ID: 311144
Board Certified: No
UCSD MEDICAL 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BISSET, LOGAN
Provider ID: 311143
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 313488
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 313484
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BLACKWELL, CHRISTOPHER
Provider ID: 313485
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BONE, SAMUEL
Provider ID: 311165
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, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BONE, SAMUEL
Provider ID: 311166
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1841216306
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BRANCH, CODY
Provider ID: 283675
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851770622

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BRANCH, CODY
Provider ID: 304199
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851770622
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BROWN, TERESA
Provider ID: 311079
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669492237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

BROWN, TERESA
Provider ID: 311080
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669492237
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE
Provider ID: 311134

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

RADIOLOGY DIAGNOSTIC

CARLSON, BLAKE
Provider ID: 311135
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548249956
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Eisenhower Medical Center, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 303054
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE
Provider ID: 303055
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 304194

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207

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: 1427430511

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH
Provider ID: 317097
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH
Provider ID: 317096
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH
Provider ID: 301914
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 313647
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA
Provider ID: 313643
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHRISTENSEN, DIANA
Provider ID: 313644
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 313500
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: 1720540743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 313501
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1720540743
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CIRIELLO, JONATHAN
Provider ID: 313504
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 313578
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 313574
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CRAMER, SCOTT
Provider ID: 313575
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 299991
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 299992
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH
Provider ID: 304171
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY
Provider ID: 286954
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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286956

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: 1497721724

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 201289

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: 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: 201291

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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GERST, SCOTT
Provider ID: 311147
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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GERST, SCOTT
Provider ID: 311148
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184602872
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 311593
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184121899
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE
Provider ID: 311594
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184121899
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GORDON, EMILE

Provider ID: 311595

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271567

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271569

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282789

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY
Provider ID: 282791
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) Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST
Provider ID: 311120
Board Certified: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366428351
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HANSCH, ERNST
Provider ID: 311121
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366428351
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR, UCSD MEDICAL CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 313604
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 313600
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

HURT, BRIAN
Provider ID: 313601
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 299957
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

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 299958
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
Provider ID: 304165
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 313591
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID
Provider ID: 313587
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KAKISH, DAVID

Provider ID: 313588

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307768

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307766

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307765

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER
Provider ID: 283143
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER
Provider ID: 283145
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 313545
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 313541
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

LIM, GARRETT
Provider ID: 313542
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 300064
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT
Provider ID: 300065
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO
Provider ID: 283315
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO

Provider ID: 317472

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MORENO, MARIO

Provider ID: 317473

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO

Provider ID: 313779

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

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO

Provider ID: 313775

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

PANZARINI, BRUNO

Provider ID: 313776

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL

Provider ID: 313561

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL

Provider ID: 313557

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

POHLEN, MICHAEL

Provider ID: 313558

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER
Provider ID: 311168
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, SAN LEANDRO HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

RICKMAN, CHRISTOPHER
Provider ID: 311169
Board Certified: No
UCSD MEDICAL 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, SAN LEANDRO HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 313701
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730685611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 313697
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730685611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROBINSON, ADAM
Provider ID: 313698
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1730685611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 313556
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1326542341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 313552
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROTMAN, YONATAN
Provider ID: 313553
Board Certified: No

UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1326542341
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROZELL, JOSEPH
Provider ID: 311178
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ROZELL, JOSEPH
Provider ID: 311179
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 299968
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 299969
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: 1679000806
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CITY OF HOPE NATIONAL MED CTR, UCSD MEDICAL CTR, MAD RIVER COMM HOSPITAL, MOUNTAINS COMMUNITY HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SADAT, SAYED
Provider ID: 304202
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679000806
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CITY OF HOPE NATIONAL MED CTR, UCSD MEDICAL CTR, MAD RIVER COMM HOSPITAL, MOUNTAINS COMMUNITY HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER
Provider ID: 240342
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1871910810
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER
Provider ID: 240344
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM
Provider ID: 299948
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM
Provider ID: 299949
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 313566
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 313562
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SHWAIKI, OMAR
Provider ID: 313563
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: 1487117826
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY
Provider ID: 283310
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851746382
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SLATER, JERRY
Provider ID: 283312
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851746382
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 313627
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366901662
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 313623
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366901662
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPARKS, CHELSEA
Provider ID: 313624
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366901662
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN
Provider ID: 303048
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992919666
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN
Provider ID: 303049
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES
Provider ID: 309702
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES
Provider ID: 309703
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 311562
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX

Provider ID: 311564
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SUN, ALEX
Provider ID: 311565
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: 1538502331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SWEET, JASON
Provider ID: 305028
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 304179
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)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 240407
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 240405
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL
Provider ID: 240408
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY
Provider ID: 268546
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY
Provider ID: 304150
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 CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 300071
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396700852
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN
Provider ID: 300070
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396700852
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 283205
Board Certified: No
COMMUNITY CARE IPA LLC
3366 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH
Provider ID: 283207
Board Certified: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 313708
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013440965
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 313705
Board Certified: No
UCSD MEDICAL GROUP
330 LEWIS ST

SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013440965
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WANG, LAWRENCE
Provider ID: 313706
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WELSH, RAYMOND
Provider ID: 314368
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 MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

WELSH, RAYMOND
Provider ID: 314369
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932370384
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE

Provider ID: 313642
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477014405
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 313638
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YIN, JANE
Provider ID: 313639
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

YOO, RAPHAEL
Provider ID: 310111
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

YOO, RAPHAEL

Provider ID: 310112
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

RADIOLOGY DIAGNOSTIC

ZAMORA, JESUS
Provider ID: 317445
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, Eisenhower Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

ZAMORA, JESUS
Provider ID: 317444
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: 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, Eisenhower Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

CALLAWAY, MALLORY
Provider ID: 287926

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER
Provider ID: 286339
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-0438
Fax: (619) 543-3763
After Hours Phone: (619) 471-0438
Provider Gender: Female
NPI: 1538312657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER
Provider ID: 286340
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538312657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

NGUYEN, VUONG
Provider ID: 317416
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
Accessibility: CONTACT PROVIDER
Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SHMARIAHU, SHELLY

Provider ID: 310802

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE

Provider ID: 268250

Board Certified: No

UCSD MEDICAL GROUP

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1356478929

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258299

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258298

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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BALL, STEPHEN
Provider ID: 311013
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN
Provider ID: 273381
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN
Provider ID: 273380
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 206534
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON

SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285061390
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BOEHMER, ALEXANDRA
Provider ID: 311058
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528789856
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 258304
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 246022
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

THERAPIST

CORTEZ, AARON

Provider ID: 279194

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

COSTELLO, MARK

Provider ID: 295634

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: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

DANG, ERIC

Provider ID: 258363

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

DANG, KAYLEE

Provider ID: 279261

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): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

JOHNSON, KENNADY
Provider ID: 305041
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: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER
Provider ID: 206523
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER
Provider ID: 206522
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

NGUYEN, HARRY
Provider ID: 271871
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RICKERTS, MATTHEW
Provider ID: 287652
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER
Provider ID: 207560
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831539337
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE
Provider ID: 206547
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1386964997
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY
Provider ID: 285183
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942818505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN
Provider ID: 302870
Board Certified: No
UCSD MEDICAL GROUP
4910 DIRECTORS PL
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568938413
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WALKER, JULIE
Provider ID: 258489
Board Certified: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
Phone: (855) 543-0333
Fax: (858) 535-6422
After Hours Phone: (855) 543-0333
Provider Gender: Female
NPI: 1720489503
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY
Provider ID: 259683
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689962169
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY
Provider ID: 259684
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689962169
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

WILLMS, HANNAH
Provider ID: 314384
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427603109
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SLEEP MEDICINE

FINCH, CHRISTINA
Provider ID: 299938
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-7283
Fax: (888) 539-8781
After Hours Phone: (800) 926-7283
Provider Gender: Female
NPI: 1598255325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SLEEP MEDICINE

FINCH, CHRISTINA
Provider ID: 299939
Board Certified: No
UCSD MEDICAL GROUP

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1598255325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307883
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307885
Board Certified: No
IHP OF SOUTHERN CAL-PHP
8929 AERO DR STE E
SAN DIEGO, CA 92123
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1073873501
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

DURNAN, CASSANDRA
Provider ID: 307882
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
Accessibility: CONTACT PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288937

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 207202

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286384

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL
Provider ID: 286363
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LIU, SHANGLEI
Provider ID: 273363
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE
Provider ID: 286387
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

LOPEZ, NICOLE
Provider ID: 286366
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 286341
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235369067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

PARRY, LISA
Provider ID: 278553
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235369067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA
Provider ID: 286370
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 529-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801812656
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA

Provider ID: 284407

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144616541

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

LIEPERT, AMY

Provider ID: 317450

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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

MASCH, JESSICA

Provider ID: 311552

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: 1902300445

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

POTENZA, BRUCE

Provider ID: 277298

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-7200

After Hours Phone: (619) 543-7200

Provider Gender: Male

NPI: 1548281496

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE
Provider ID: 284418
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1548604648
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

ARMANI, AVA
Provider ID: 282141
Board Certified: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100
Provider Gender: Female
NPI: 1861759383
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

BARNES, RYAN
Provider ID: 299904
Board Certified: No
IHP OF SOUTHERN CAL-PHP
7910 FROST ST STE 250
SAN DIEGO, CA 92123
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1831493501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

SURGERY GENERAL

BARNES, RYAN
Provider ID: 129062
Board Certified: No
COMMUNITY CARE IPA LLC

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1831493501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-4:30PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

SURGERY GENERAL

BENCH, SHAWN
Provider ID: 129060
Board Certified: Yes
COMMUNITY CARE IPA LLC
7910 FROST ST STE 250
SAN DIEGO, CA 92123
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1669700753
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9AM-5PM F 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

SURGERY GENERAL

BENCH, SHAWN
Provider ID: 299895
Board Certified: Yes
IHP OF SOUTHERN CAL-PHP
7910 FROST ST STE 250
SAN DIEGO, CA 92123
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1669700753
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9AM-5PM F 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

SURGERY GENERAL

BERUMEN, JENNIFER
Provider ID: 260052
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1558566372

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 289164
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 285272
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304609
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304608
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

FAIRBANKS, TIMOTHY
Provider ID: 260842
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1407010556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

GARCIA CABRERA, ANA
Provider ID: 311499
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205330354
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HOLLANDSWORTH, HANNAH
Provider ID: 310729
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1972954303
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HOLLANDSWORTH, HANNAH
Provider ID: 316732
Board Certified: No
UCSD MEDICAL 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
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HORGAN, SANTIAGO
Provider ID: 286379
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-0700
After Hours Phone: (619) 471-0700
Provider Gender: Male
NPI: 1932297231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286367
Board Certified: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932297231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

IGNACIO, ROMEO
Provider ID: 217053
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7711
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538147145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 286355
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 201729
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH
Provider ID: 286356
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
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

REEVES, JAMES
Provider ID: 311505
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANDLER, BRYAN
Provider ID: 286357
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANDLER, BRYAN
Provider ID: 286383
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

SANTORELLI, JARRETT
Provider ID: 272303
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

YELON, JAY
Provider ID: 314355
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY HAND

CAGE, DORI
Provider ID: 296731
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL
Provider ID: 284934
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID
Provider ID: 244087
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-5720
After Hours Phone: (619) 543-5720
Provider Gender: Male
NPI: 1093730251
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA
Provider ID: 304129
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, TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, COLUSA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HATEFI, DUSTIN
Provider ID: 310033
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

NPI: 1790072106
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

HIRSHMAN, BRIAN
Provider ID: 316060
Board Certified: No
UCSD MEDICAL 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

LEVY, MICHAEL
Provider ID: 298705
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE
Provider ID: 244150
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH
Provider ID: 304170

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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

OSORIO, JOSEPH
Provider ID: 242007
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: 1437416591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

PHAM, MARTIN
Provider ID: 244158
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

TOMLIN, JEFFREY
Provider ID: 272950
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

U, HOI
Provider ID: 244132
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BOCKHORN, LAUREN
Provider ID: 313622
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER
Provider ID: 241162
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUKATA, SUSAN
Provider ID: 277948
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUKATA, SUSAN
Provider ID: 304181
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: 1932140639
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHENG, YU-TSUN
Provider ID: 301903
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK
Provider ID: 304174
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932536828
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CHOI, JIHOON
Provider ID: 284788
Board Certified: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285097741
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

CIDAMBI, EMILY
Provider ID: 296446
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1659634699
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CIDAMBI, EMILY
Provider ID: 246466
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

CORTES, ALEJANDRO
Provider ID: 313520
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1972066785
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DIJANIC, CHRISTOPHER
Provider ID: 313482

Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1295396281
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

DWIGHT, KATHRYN
Provider ID: 316034
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548797103
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

EDMONDS, ERIC
Provider ID: 205495
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1013048412
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

EDMONDS, ERIC
Provider ID: 260841
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: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

GEORGE, JOSE
Provider ID: 313607
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

GOEB, YANNICK
Provider ID: 284794
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

HURVITZ, ANDREW
Provider ID: 311579
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

HURVITZ, ANDREW
Provider ID: 311580
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
Accessibility: CONTACT

PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

JACKSON, MADELEINE
Provider ID: 301818
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
Accessibility: CONTACT PROVIDER
Hours: SU-SA 12AM-11:59PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

MICHEL, MATTHEW
Provider ID: 314760
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: Male
NPI: 1992202956
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

PASSIAS, BRADEN
Provider ID: 313512
Board Certified: No
UCSD MEDICAL GROUP
200 W 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SEDGHI, SOUDABEH
Provider ID: 313492
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285247

Board Certified: No

UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 304164

Board Certified: No

UCSD MEDICAL GROUP

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 205914

Board Certified: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1548417652

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU-SA 12AM-11:59PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260953

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: 1548417652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

BICKLER, STEPHEN
Provider ID: 270090
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

GOSMAN, AMANDA
Provider ID: 205841
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1164436291
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KELLER, BENJAMIN
Provider ID: 285941
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1285953364
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KELLER, BENJAMIN
Provider ID: 272196
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 205340
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KLING, KAREN
Provider ID: 283380
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

LAZAR, DAVID
Provider ID: 283140
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538365002
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

LAZAR, DAVID
Provider ID: 205606
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538365002
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN
Provider ID: 256194
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-7711
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1598979593
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 206172
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

THOMPSON, KYLE
Provider ID: 310985
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PLASTIC

HINCHCLIFF, KATHARINE
Provider ID: 277965
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1346674561
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

HINCHCLIFF, KATHARINE
Provider ID: 277288
Board Certified: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1346674561
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 255576
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 246239
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790341832
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 246240
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

KOLB, FREDERIC
Provider ID: 255575
Board Certified: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790341832
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

LEWIS, PRIYA
Provider ID: 302132
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 316714
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497280028
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 311375
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 311376
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 311448
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN
Provider ID: 311447
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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

MASSENBURG, BENJAMIN

Provider ID: 311449

Board Certified: 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

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

SURGERY PLASTIC

XUE, JAY

Provider ID: 317447

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

FOX, KENNETH

Provider ID: 257841

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

SURGERY THORACIC

GANTA, SRUJAN

Provider ID: 256383

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: CONTACT PROVIDER
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: 275611
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: CONTACT PROVIDER
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

LEWIS, MICHAEL
Provider ID: 296906
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

NIGRO, JOHN
Provider ID: 205367
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 202
SAN DIEGO, CA 92123
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Male
NPI: 1881707818
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY THORACIC

VOSSLER, JOHN
Provider ID: 306389
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1659630572
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

TRANSPLANT SURGERY

MEKEEL, KRISTIN
Provider ID: 262109
Board Certified: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY STE 107
SAN DIEGO, CA 92123
Phone: (858) 966-7711
After Hours Phone: (858) 966-7711
Provider Gender: Female
NPI: 1104861947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL
Provider ID: 262192
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: 1619111440
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

UROLOGY

ALBO, MICHAEL

Provider ID: 313734
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: 1912938499
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

ALBO, MICHAEL
Provider ID: 311548
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: Male
NPI: 1912938499
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

BAGRODIA, ADITYA
Provider ID: 313884
Board Certified: No
UCSD MEDICAL 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 CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

BECHIS, SETH
Provider ID: 313746
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1376863746
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

CHEN, TONY
Provider ID: 283960
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1245684497
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

GRIFFITHS, LUKE
Provider ID: 316115
Board Certified: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1760945836
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

KADER, ANDREW
Provider ID: 311541
Board Certified: No
UCSD MEDICAL 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 274480
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
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 311516
Board Certified: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174609127
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 256847
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MONGA, MANOJ
Provider ID: 313310
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

MOORE, SARAH
Provider ID: 311610
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: 1538620760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

UROLOGY

PATEL, DEVIN
Provider ID: 246094
Board Certified: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-7876
After Hours Phone: (858) 657-7876
Provider Gender: Male
NPI: 1437505559
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, CEDARS SINAI MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

UROLOGY

SANTIAGO-LASTRA, YAHIR
Provider ID: 313690
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1699936609
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

SANTIAGO-LASTRA, YAHIR
Provider ID: 311487
Board Certified: 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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

UROLOGY

SWORDS, KELLY
Provider ID: 206183
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 295833
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 284664
Board Certified: Yes
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Male
NPI: 1215374210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 284665
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

UNTERBERG, STEPHEN
Provider ID: 295834
Board Certified: No
IHP OF SOUTHERN CAL-PHP
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858) 485-0554
Provider Gender: Male
NPI: 1215374210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

UROLOGY

WOO, JASON
Provider ID: 313664
Board Certified: No
UCSD MEDICAL GROUP
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437380086
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

SAN MARCOS

CERTIFIED NURSE PRACTITIONER

CABRAL, ALEJANDRA
Provider ID: 297888
Board Certified: 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: 1699222620
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FLORES, BERTHA
Provider ID: 313780
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

FODDA, RAMI
Provider ID: 296603
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1164660452
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

GARCIA, REGINA
Provider ID: 297837
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1639673858
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HAN, ANGELA
Provider ID: 300215
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1629242839

Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: JOHN MUIR MEDICAL CENTER WALNUT CREEK CAMPUS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

IORIO, ALANNA
Provider ID: 317360
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KOHOUT, KATHRYN
Provider ID: 291105
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

MOONEY, PATRICIA
Provider ID: 280382
Board Certified: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Female
NPI: 1700470200
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

MUNOZ, EMMANUEL
Provider ID: 312286
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767

Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1710366489
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

NGUYEN, VANESSA
Provider ID: 306716
Board Certified: No
IHP OF SOUTHERN CAL-PHP
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Phone: (760) 281-3662
Fax: (760) 316-5268
After Hours Phone: (760) 281-3662
Provider Gender: Female
NPI: 1376219246
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PARSONS, MEKRAE
Provider ID: 303220
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY
Provider ID: 307853
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1033841861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA
Provider ID: 290739
Board Certified: 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 INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

DERMATOLOGY

BROWN, REGINA
Provider ID: 309982
Board Certified: No
IHP OF SOUTHERN CAL-PHP
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Phone: (760) 738-7600
Fax: (760) 738-7616
After Hours Phone: (760) 738-7600
Provider Gender: Female
NPI: 1801424692
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

WITCZAK, IZABELA
Provider ID: 316237
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

DO, HULBERT
Provider ID: 295941
Board Certified: No
IHP OF SOUTHERN CAL-PHP
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Phone: (760) 798-8855
Fax: (619) 616-2104
After Hours Phone: (760) 798-8855
Provider Gender: Male
NPI: 1679733760
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

DO, HULBERT

Provider ID: 291583

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1679733760

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245578

Board Certified: No

COMMUNITY CARE IPA LLC

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (760) 755-5245

After Hours Phone: (760) 798-8855

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847

Board Certified: No

IHP OF SOUTHERN CAL-PHP

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (619) 616-2104

After Hours Phone: (760) 798-8855

Provider Gender: Male

NPI: 1811307051

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296052

Board Certified: No

COMMUNITY CARE IPA LLC

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (619) 616-2104

After Hours Phone: (760)

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

798-8855
Provider Gender: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 291607
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: Male
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

NEUROLOGY

ANDER, AZIZ
Provider ID: 290382
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: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

GUPTA, MONIKA
Provider ID: 307938
Board Certified: No
IHP OF SOUTHERN CAL-PHP
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Phone: (760) 281-3662
Fax: (760) 316-5268
After Hours Phone: (760) 281-3662
Provider Gender: Female
NPI: 1922243401
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MANDEVILLE, ROSS
Provider ID: 309933
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, MAYERS MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

MAREK, MAKSYM
Provider ID: 306708
Board Certified: No
IHP OF SOUTHERN CAL-PHP
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Phone: (760) 281-3662
Fax: (619) 425-3842
After Hours Phone: (760) 281-3662
Provider Gender: Male
NPI: 1881182079
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

NEUROLOGY

SORIA LOPEZ, JOSE
Provider ID: 295745
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, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 9AM-12:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 311881

Board Certified: 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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PEDIATRICS

LUM HO, RACHEL

Provider ID: 304047

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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRICS

LUM HO, RACHEL

Provider ID: 303150

Board Certified: No

IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1215469283

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

PEDIATRICS

POSADAS, EMERITO

Provider ID: 257536

Board Certified: No

BLUE SHIELD PROMISE HEALTH PLAN DIRECT
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1720093198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

PEDIATRICS

QUINTERO, CAROLYN
Provider ID: 303142
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1023033156
Provider English Spoken: Y
Provider Language(s) Spoken: Afar, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 298336
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

NAVARRETE CELESTINO, MISHEL
Provider ID: 302439
Board Certified: No
IHP OF SOUTHERN CAL-PHP
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1578263760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POLLEY, SHANNON
Provider ID: 296093
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
SA 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

RUBIO, HALEY
Provider ID: 301290
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1598394371
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

FLYNN, DANIELLE
Provider ID: 290795
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

SAN YSIDRO

FAMILY PRACTICE

ARRIETA, NOEMI
Provider ID: 297794
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
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BUTLER, KELLEY
Provider ID: 310821
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1316527286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

BUTLER, KELLEY
Provider ID: 310820
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1316527286
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

CHOU, SUSANNA
Provider ID: 310842
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

DALUGDUGAN, ESTHER
Provider ID: 302285
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1962662718
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

GOLU, CRISTIANA
Provider ID: 310232
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1083684997
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

NAVARRO, VANESSA MARIA
Provider ID: 297756
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1952563421
Provider English Spoken: Y
Provider Language(s) Spoken: Filipino, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

ORTEGA, LUIS
Provider ID: 295225
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

QURESHI, SOFIA

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider ID: 308756
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE GERIATRIC MEDICINE

BULOW, KWI
Provider ID: 302346
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

ALDOUS, JEANNETTE
Provider ID: 290421
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

POLESKY, ANDREA
Provider ID: 315321
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
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA
Provider ID: 296122
Board Certified: Yes
IHP OF SOUTHERN CAL-PHP
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
Provider ID: 310885
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1033138714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

DINH, MY
Provider ID: 290490
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
Provider ID: 294885
Board Certified: 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
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-8PM SA 8AM-2PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA
Provider ID: 294886
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4050 BEYER BLVD SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

Fax: (619) 205-6305
- *After Hours Phone: (619) 662-4100*

Provider Gender: Female
NPI: 1255878997
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-8PM SA 8AM-2PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

KOBAYASHI, KAREN
Provider ID: 310881
Board Certified: No
IHP OF SOUTHERN CAL-PHP
- 4050 BEYER BLVD SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*

Fax: (619) 205-6305
- *After Hours Phone: (619) 662-4100*

Provider Gender: Female
NPI: 1497929517
- *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-5PM*
- *Website: N/A*

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO
Provider ID: 315325
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

DOKICH, SRETENKA
Provider ID: 313372
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

FUJII, CINDY
Provider ID: 298309
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1871664821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PEDIATRICS

RODRIGUEZ, ALDO
Provider ID: 295779
Board Certified: No
IHP OF SOUTHERN CAL-PHP
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M 8:30AM-8PM
W-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

IBANEZ, BERENICE
Provider ID: 290465
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN
Provider ID: 296045
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
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

RHEUMATOLOGY

LWIN, THUTHIRI
Provider ID: 307650
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SANTEE

PEDIATRICS

IKE, ERICA
Provider ID: 309723
Board Certified: No
IHP OF SOUTHERN CAL-PHP
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1821413907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOHNS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: IHP of Southern Cal-PHP

TEMECULA

CERTIFIED NURSE PRACTITIONER

MIRACLE, ANGELYN
Provider ID: 300260
Board Certified: No
RADY CHILDRENS HEALTH NETWORK
31170 TEMECULA PKWY STE 200
TEMECULA, CA 92592
Phone: (951) 699-3299
Fax: (951) 302-1313
After Hours Phone: (951) 699-3299
Provider Gender: Female
NPI: 1144539842
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

SURGERY GENERAL VASCULAR

HOWE, STEVEN
Provider ID: 206759
Board Certified: No
UCSD MEDICAL GROUP
31700 TEMECULA VALLEY PARKWAY
TEMECULA, CA 92592
Phone: (951) 303-2349
Fax: (951) 303-8591
After Hours Phone: (951) 303-2349
Provider Gender: Male
NPI: 1497702740
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

VALLEY CENTER

CERTIFIED NURSE PRACTITIONER

HOULE, STEPHANIE
Provider ID: 313722
Board Certified: No
IHP OF SOUTHERN CAL-PHP
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Provider Gender: Female
NPI: 1003674847
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

GUPTA, ANUJ
Provider ID: 297703
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2023 W VISTA WAY STE D
VISTA, CA 92083

Phone: (619) 330-8771
Fax: (619) 330-8772
After Hours Phone: (619) 330-8771
Provider Gender: Male
NPI: 1073629549
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR, PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

ABELHAD, NADIA
Provider ID: 306897
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: 1619400801
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

ABELHAD, NADIA
Provider ID: 306896
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: 1619400801
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CARDIOVASCULAR DISEASE

DO, HULBERT
Provider ID: 290574
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1679733760
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp

Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 9AM-8PM
M-TH 9AM-8PM
F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

GALLO, PHILIP
Provider ID: 315007
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\65
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

GALLO, PHILIP
Provider ID: 316198
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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 21\65
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

SONG, CAROL
Provider ID: 290550
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1518166685
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN
Provider ID: 302526
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1629354360
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\24
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN
Provider ID: 304506
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
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA
Provider ID: 291411
Board Certified: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 270
VISTA, CA 92081
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1306978614
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON
Provider ID: 245207
Board Certified: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 315334

Board Certified: No

IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 315339

Board Certified: No

IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

DECARLI, TASIA

Provider ID: 315335

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1598158768

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 315953

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: Male

NPI: 1528741287

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 315954

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: 1528741287

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 314647

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: Male

NPI: 1528741287

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

ESTEINOU, ENRIQUE

Provider ID: 314648

Board Certified: 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

Accessibility: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 241907

Board Certified: No

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA
Provider ID: 304492
Board Certified: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA
Provider ID: 304493
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: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA
Provider ID: 302296
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified: No

IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298085

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: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 305737

Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298083

Board Certified: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

CERTIFIED NURSE PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282072

Board Certified: No

UCSD MEDICAL GROUP

910 SYCAMORE AVE STE 102
VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NICHOLAS, ESTELA

Provider ID: 239866

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: CONTACT PROVIDER

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

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

PRITZKER, JOELY

Provider ID: 239773

Board Certified: No

COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619384351
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM
Provider ID: 315056
Board Certified: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1346079910
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM
Provider ID: 315057
Board Certified: 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
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM
Provider ID: 314651
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1346079910
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SKOPEK, TAM
Provider ID: 314652
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1346079910
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE
Provider ID: 281857
Board Certified: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265487326
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY
Provider ID: 298837
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: 1033841861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY
Provider ID: 303315
Board Certified: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY
Provider ID: 300224
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CHIROPRACTOR

CORTEZ, JAIME
Provider ID: 290483
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1508195348
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 282163
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 282128
Board Certified: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081
Phone: (619) 543-6397
Fax: (888) 539-8781
After Hours Phone: (619) 543-6397
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

DAO, MARC
Provider ID: 297754
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1467542175
Provider English Spoken: Y
Provider Language(s) Spoken: French, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

PARKS, MONICA
Provider ID: 302414
Board Certified: 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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS

Provider ID: 290607
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1659614303
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

LEONARD, LISA
Provider ID: 290710
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: CONTACT PROVIDER
Hours: M-TH 9AM-8PM
F 9AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL
Provider ID: 290903
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8AM-5PM
M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL
Provider ID: 290697
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM TH 10:30AM-7:30PM F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

OPTOMETRIST

KIM, MICHAEL
Provider ID: 245239
Board Certified: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8AM-5PM TH 10:30AM-7:30PM F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

PEDIATRICS

RAHIMI, NASSRIN
Provider ID: 257581
Board Certified: 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: CONTACT PROVIDER
Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

PHYSICIANS ASSISTANT

WALLACE, STEPHANIE
Provider ID: 239770
Board Certified: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (888) 216-8482
Provider Gender: Female
NPI: 1518104942
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

WHARRAM, JENNIFER

Provider ID: 314059
Board Certified: No
IHP OF SOUTHERN CAL-PHP
2067 W VISTA WAY STE 295
VISTA, CA 92083
Phone: (760) 298-5787
Fax: (760) 560-2007
After Hours Phone: (760) 298-5787
Provider Gender: Female
NPI: 1063168094
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PODIATRIST

MILLER, JULIE
Provider ID: 290666
Board Certified: No
IHP OF SOUTHERN CAL-PHP
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619115664
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PODIATRIST

MILLER, JULIE
Provider ID: 305464
Board Certified: No
IHP OF SOUTHERN CAL-PHP
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619115664
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER
Provider ID: 248009
Board Certified: No
COMMUNITY CARE IPA LLC
2067 W VISTA WAY STE 185
VISTA, CA 92083
Phone: (760) 631-5888
Fax: (760) 631-5880
After Hours Phone: (760) 591-7750
Provider Gender: Male
NPI: 1114977535
Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 8\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 7AM-7PM
TU 7AM-5PM
W 7AM-7PM
TH 7AM-5PM
F 7AM-7PM
Website: N/A
IPA: Community Care IPA LLC

SURGERY GENERAL

ARMANI, AVA
Provider ID: 282144
Board Certified: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861759383
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

GROVE, JAY
Provider ID: 245227
Board Certified: 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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA
Provider ID: 241737
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN
Provider ID: 287654
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE, JESSICA
Provider ID: 275308
Board Certified: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164809950
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

LI, JINGHONG
Provider ID: 255940
Board Certified: 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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PATEL, SAGAR
Provider ID: 283000
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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

TRAN, LINH
Provider ID: 202658
Board Certified: Yes
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Phone: (951) 677-1111
After Hours Phone: (951) 677-1111
Provider Gender: Female
NPI: 1851682728
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

KUMAR, AVNEE
Provider ID: 300013
Board Certified: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Phone: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951) 677-1111
Provider Gender: Female
NPI: 1750745394
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

LEVERONE, NICHOLAS
Provider ID: 313304
Board Certified: 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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

PULMONARY DISEASES

SURI, RAJAT
Provider ID: 283349
Board Certified: No
UCSD MEDICAL GROUP
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Phone: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951) 677-1111
Provider Gender: Male
NPI: 1144615337
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GROSSMONT HOSPITAL [1] [2] [3]

Provider ID: 170046

5555 GROSSMONT CENTER DR
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619) 740-6000

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week

License Number: 080000006

NPI: 1528041811

Website: www.sharp.com/hospitals/grossmont/

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Birthing Friendly: Birthing Friendly: Y

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619) 543-4500

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week

NPI: 1992880512

Website: N/A

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR HEALTH [1] [2] [3]

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858) 613-4000

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week

License Number: 080000127

NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar- poway- outpatient

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR MEDICAL CENTER [1] [2] [3]

Provider ID: 173011

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442) 281-5000

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week

License Number: 080000083

NPI: 1457321317

Website: www.palomarhealth.org/facilities/palomar-medical- center

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Birthing Friendly: Birthing Friendly: Y

PALOMAR REHABILITATION INSTITUTE

Provider ID: 547653

2181 CITRACADO PKWY

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction – ابحث عن روابط سمات الأداء في القسم الأمامي من هذا الدليل.

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

ESCONDIDO, CA 92029
Phone: (442) 277-6100
After Hours Phone: (442) 277-6100
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 550006213
NPI: 1831702398
Website: https://www.palomarhealthrehabinstitute.com
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PARADISE VALLEY HOSPITAL [1] [2]
Provider ID: 170057
2400 E 4TH ST
NATIONAL CITY, CA 91950
Phone: (619) 470-4321
After Hours Phone: (619) 470-4321
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: SU-SA 12AM-11PM
NPI: 1356410351
Website: www.paradisevalleyhospital.net
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RADY CHILDRENS HOSPITAL SAN DIEGO [2] [3]
Provider ID: 171083
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
NPI: 1710065933
Website: www.rchsd.org
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SCRIPPS GREEN HOSPITAL [1] [2] [3]
Provider ID: 171084
10666 N TORREY PINES RD
LA JOLLA, CA 92037
Phone: (858) 455-9100
After Hours Phone: (858) 455-9100
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 080000139
NPI: 1841233780
Website: www.scripps.org/locations/hospitals__scripps- green- hospital
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SCRIPPS MEMORIAL HOSPITAL [1] [2] [3]
Provider ID: 170045
9888 GENESEE AVE
LA JOLLA, CA 92037
Phone: (800) 727-4777
After Hours Phone: (800) 727-4777
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction – ابحث عن روابط سمات الأداء في القسم الأمامي من هذا الدليل.

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hours: 24 Hours / 7 days/week
License Number: 080000050
NPI: 1841277704
Website: www.scripps.org/locations/hospitals__scripps- memorial- hospital- la- jolla
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Birthing Friendly: 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: CONTACT PROVIDER
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: CONTACT PROVIDER
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: CONTACT PROVIDER
Birthing Friendly: Birthing Friendly: Y

SELECT SPECIALTY HOSPITAL SAN DIEGO
Provider ID: 170165
555 WASHINGTON ST
SAN DIEGO, CA 92103
Phone: (619) 260-8300

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction – ابحث عن روابط سمات الأداء في القسم الأمامي من هذا الدليل.
اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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): N
Accessibility: CONTACT PROVIDER

SHARP CHULA VISTA MED CTR [1 2]

Provider ID: 170251
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (619) 502-5800
After Hours Phone: (619) 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: CONTACT PROVIDER
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: CONTACT PROVIDER

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS [1 2]

Provider ID: 170054
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 939-3400
After Hours Phone: (858) 939-3400
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: SU-SA 12AM-11:59PM
License Number: 080000039
NPI: 1407839921
Website: www.sharp.com
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction – ابحث عن روابط سمات الأداء في القسم الأمامي من هذا الدليل.
اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
NPI: 1407839921
Website: www.sharp.com/hospitals/memorial/
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Birthing Friendly: Birthing Friendly: Y

TRI CITY MEDICAL CTR [2 3]
Provider ID: 170049
4002 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 724-8411
After Hours Phone: (760) 724-8411
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
Hours: 24 Hours / 7 days/week
NPI: 1801861190
Website: www.tricitymed.org
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Birthing Friendly: Birthing Friendly: Y

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER [1 2]
Provider ID: 685221
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (619) 287-3270
After Hours Phone: (619) 287-3270
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 090000013
NPI: 1184722779
Website: N/A
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER [1 2]
Provider ID: 685221
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (619) 287-3270
After Hours Phone: (619) 287-3270
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 090000101
NPI: 1184722779
Website: N/A
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

UCSD LA JOLLA JOHN SALLY THORNTON [1 2 3]
Provider ID: 170053
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7000
After Hours Phone: (858) 657-7000
Accepting New Patients: No
Min/Max Age: 0\None
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 090000101
NPI: 1497021265
Website: N/A
American Sign Language (ASL):

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction – ابحث عن روابط سمات الأداء في القسم الأمامي من هذا الدليل.
اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

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: CONTACT PROVIDER

Birthing Friendly: Birthing Friendly: Y

[1]Cal Hospital Compare, [2]Leapfrog, [3]Blue Distinction – ابحث عن روابط سمات الأداء في القسم الأمامي من هذا الدليل.

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER

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: CONTACT PROVIDER

EL CAJON

KASEY'S HOME

Provider ID: 674600

1164 CRYSTAL LN
EL CAJON, CA 92020

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619) 465-8010

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1639392079

Website: N/A

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FALLBROOK

VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR
FALLBROOK, CA 92028

Phone: (760) 731-2157

Fax: (760) 721-9872

After Hours Phone: (760) 731-2157

Accepting New Patients: No

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: CONTACT PROVIDER

LA MESA

HILLDALE HABILITATION CENTER

Provider ID: 527671

7979 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619) 465-8010

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1073736427

Website: N/A

Credentials and/or

certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SHASTA HOME
Provider ID: 674614
10346 CHALLENGE BLVD
LA MESA, CA 91941
Phone: (619) 465-8010
Fax: (619) 465-8348
After Hours Phone: (619) 465-8010
Accepting New Patients: No
Hours: M-F 8AM-5PM
NPI: 1134342520
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OCEANSIDE

ANDRU HOME
Provider ID: 664438
311 DEL FLORA ST
OCEANSIDE, CA 92058
Phone: (760) 439-1741
Fax: (949) 218-1670
After Hours Phone: (760) 439-1741
Accepting New Patients: No
Hours: M-F 9AM-5PM
NPI: 1801981667
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BRADY HOME
Provider ID: 664440
4825 GLENHAVEN DR
OCEANSIDE, CA 92056
Phone: (760) 295-4505
Fax: (949) 218-1670
After Hours Phone: (760) 295-4505
Accepting New Patients: No
Hours: M-F 9AM-5PM
NPI: 1760725766
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MCNEALY HOUSE
Provider ID: 662925
4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

MONARCH HOME
Provider ID: 666883
877 MUIRFIELD DR
OCEANSIDE, CA 92058
Phone: (760) 231-8139
Fax: (760) 529-5148
After Hours Phone: (760) 231-8139
Accepting New Patients: No
Hours: M-F 8AM-5PM
NPI: 1760660336
Website: N/A

Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SAN MARCOS

CARLO HOUSE
Provider ID: 662931
411 CARLO ST
SAN MARCOS, CA 92078
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

VALLEY CENTER

AMREEN HOME
Provider ID: 658588
13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082
Phone: (760) 751-9879
Fax: (760) 749-3019
After Hours Phone: (760) 751-9879
Accepting New Patients: No
NPI: 1700160405
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VISTA

AMBER HOME
Provider ID: 664436
305 CARLSON CT
VISTA, CA 92083
Phone: (760) 631-1527
Fax: (949) 218-1670
After Hours Phone: (760) 631-1527
Accepting New Patients: No
Hours: M-F 9AM-5PM
NPI: 1497924823
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ANZA HOUSE
Provider ID: 662920
1736 ANZA AVE
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

GRACE HOUSE
Provider ID: 662919
2507 HIBISCUS AVE
VISTA, CA 92081
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No

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: CONTACT PROVIDER

HAYDEN HOME
Provider ID: 664442
822 GRANADA DR
VISTA, CA 92083
Phone: (760) 941-8052
Fax: (949) 218-1670
After Hours Phone: (760) 941-8052
Accepting New Patients: No
NPI: 1245400670
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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: CONTACT PROVIDER

MONTGOMERY HOUSE
Provider ID: 662927
1658 MONTGOMERY DR
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

ORIENTE HOUSE
Provider ID: 662928
3081 ORIENTE DR
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

SAVA HOME
Provider ID: 669500
263 AHMU TER
VISTA, CA 92084
Phone: (760) 305-7052
Fax: (760) 509-4949
After Hours Phone: (760) 305-7052

Accepting New Patients: No
Hours: M-F 8AM-5PM
NPI: 1962541177
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SUSAN PARHAM HOUSING CORPORATION
Provider ID: 662929
1658 ANZA AVE
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

VISTA HOUSE
Provider ID: 662916
1768 MONTE MAR RD
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
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: CONTACT PROVIDER

CHULA VISTA

OPEN ARMS ADHC

Provider ID: 417307

301 E J ST
CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619) 420-1404

Accepting New Patients: No

Hours: M-F 7AM-3PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N

Language line interpreter services: N

If Facility has completed cultural competence training?: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English Languages: N

Medi-Cal: Y

Website: http://openarmsadhc.com

OPEN ARMS ADULT DAY HEALTHCARE

Provider ID: 716620

301 E J ST
CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619) 420-1404

Accepting New Patients: No

Hours: M-F 7AM-3PM

License Number: 060000842

NPI: 1184494049

Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N

Language line interpreter services: N

If Facility has completed cultural competence training?: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English Languages: N

Medi-Cal: Y

Website: N/A

EL CAJON

EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST
EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619) 328-2112

Accepting New Patients: No

Hours: SU-SA 9AM-3PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N

Language line interpreter services: N

If Facility has completed cultural competence training?: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English Languages: N

Medi-Cal: Y

Website: N/A

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619) 444-1522

Accepting New Patients: No

Hours: M-F 8AM-4PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):

N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: http://magnoliaadhc.com

WESTERN ADULT DAY HEALTH CARE CENTER
Provider ID: 417305
240 S MAGNOLIA AVE
EL CAJON, CA 92020
Phone: (619) 631-7222
Fax: (619) 631-9228
After Hours Phone: (619) 631-7222
Accepting New Patients: No
Site Languages(s) Spoken: Chaldean Neo-Aramaic, Spanish, Arabic, Tagalog, Farsi
Hours: M-F 7AM-3:30PM
License Number: 060000892
NPI: 1821125550
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: Y
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: Y
Medi-Cal: Y
Website: https://westernadhc.wordpress.com/

LA MESA

GOLDEN LIFE ADHC
Provider ID: 619502
9158 FLETCHER PKWY
LA MESA, CA 91942
Phone: (619) 357-7753
Fax: (619) 439-6038
After Hours Phone: (619) 357-7753
Accepting New Patients: No
NPI: 1093921900
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: N/A

NATIONAL CITY

HORIZON CBAS
Provider ID: 642082
1035 HARBISON AVE
NATIONAL CITY, CA 91950
Phone: (619) 474-1822
Fax: (619) 474-1826
After Hours Phone: (619) 474-1822
Accepting New Patients: No
Site Languages(s) Spoken: Spanish, Tagalog
Hours: M-F 8AM-4:30PM
License Number: 060000582
NPI: 1396476388
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N

Medi-Cal: Y
Website: N/A

POWAY

POWAY ADULT DAY HEALTH CARE CENTER
Provider ID: 404183
12250 CROSTHWAITE CIR
POWAY, CA 92064
Phone: (858) 748-5044
Fax: (858) 748-5405
After Hours Phone: (858) 748-5044
Accepting New Patients: No
License Number: 60000822
NPI: 1568659977
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: N/A

SAN DIEGO

CASA PACIFICA ADHCC
Provider ID: 417303
1424 30TH ST STE C
SAN DIEGO, CA 92154
Phone: (619) 424-8181
After Hours Phone: (619) 424-8181
Accepting New Patients: No
NPI: 1609920305
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: www.casa- 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: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: WWW.LEGACYADHC.COM

LOVING CARE ADHC
Provider ID: 419961
2565 CAMINO DEL RIO S
STE 201
SAN DIEGO, CA 92108
Phone: (619) 718-9777
Fax: (619) 569-2855
After Hours Phone: (619) 718-9777
Accepting New Patients: No
Hours: SU-SA 8:30AM-4PM
NPI: 1346455961
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N

Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: www.lovingcareadhc.com

SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE
Provider ID: 539018
4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
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: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: Y
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: Y
Medi-Cal: Y
Website: 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
License Number: 060000832
NPI: 1528271186
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
If Facility has completed cultural competence training?: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Medi-Cal: Y
Website: www.americareadhc.com

H. الخدمات والدعم طويل الأجل لدى المقاطعة (IHSS)

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

5560 OVERLAND AVE
SAN DIEGO, CA 92123

Phone: (858) 495-5885

License Number: 1710308986

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

ALPINE

TORRES, RANDALL
Provider Gender: Male
License Number: PSY31823
NPI: 1871696435
Provider English Spoken: Y
Cultural Competency: N
RANDALL P TORRES
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CAMPO

CASTLEBERRY, DANI
Provider Gender: Female
License Number: LCS95022
NPI: 1053706853
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
DANI E CASTLEBERRY
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906
Phone: (619) 662-4100
Fax: (619) 824-9071
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHULA VISTA

BAYLON, ALDO
Provider Gender: Male
License Number: PSY29904
NPI: 1649429150
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ALDO BAYLON
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 14\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM

CASTLEBERRY, DANI
Provider Gender: Female
License Number: LCS95022
NPI: 1053706853
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
DANI E CASTLEBERRY
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 240-7825

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CELAYA, PATRICIA
Provider Gender: Female
License Number: PSY33233
NPI: 1952656902
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
PATRICIA E CELAYA
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM

GOULD, HILARY
Provider Gender: Female
License Number: PSY31088
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N
HILARY GOULD
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM

JUAREZ, AMERICA
Provider Gender: Female
License Number: LCS92516
NPI: 1386281541
Provider English Spoken: Y
Cultural Competency: N
AMERICA P JUAREZ
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KURZ, TROY
Provider Gender: Male
License Number: A157190
NPI: 1154862357

Provider English Spoken: Y
Cultural Competency: N
TROY L KURZ
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
SA 8AM-4PM

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 14\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

RIVERA, KEVIN JOHN
Provider Gender: Male
License Number: A193862
NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

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

RIVERA, KEVIN JOHN
Provider Gender: Male
License Number: A193862
NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
678 THIRD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SHIELDS, SEBASTIAN
Provider Gender: Male
License Number: MFC124495
NPI: 1558895342
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
SEBASTIAN L SHIELDS
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
678 THIRD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y

Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM

WIJAYARATNE, IMANIE
Provider Gender: Female
License Number: PSY25044
NPI: 1932358355
Provider English Spoken: Y
Cultural Competency: N
IMANIE S WIJAYARATNE
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 245-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

EL CAJON

ARAIZA, ERNESTINA
Provider Gender: Female
License Number: PSY32549
NPI: 1568608636
Provider English Spoken: Y
Cultural Competency: N
ERNESTINA ARAIZA
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CRUZ, GUADALUPE
Provider Gender: Male
License Number: LCS101900
NPI: 1649727942
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
GUADALUPE A CRUZ
855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KAHLY, BROOKE
Provider Gender: Female
License Number: LCS84367
NPI: 1649833120
Provider English Spoken: Y
Cultural Competency: N
BROOKE N KAHLY
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Chinese, Farsi, Italian, Japanese, Mandarin, Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MAXWELL-JUNGE, MELISSA
Provider Gender: Female
License Number: LCS90791
NPI: 1275182826
Provider English Spoken: Y
Cultural Competency: N
MELISSA K MAXWELL-JUNGE
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 667-6125
Fax: (619) 590-9036
After Hours Phone: (619) 667-6125
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SADDA, REEM
Provider Gender: Female
License Number: A163129
NPI: 1871921833
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
REEM J SADDA
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

WEAVER, AMANDA
Provider Gender: Female
License Number: MFC105361
NPI: 1174266423

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
AMANDA R WEAVER
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WHEELER, KIM
Provider Gender: Female
License Number: PSY34237
NPI: 1700577434
Provider English Spoken: Y
Cultural Competency: N
KIM N WHEELER
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 11\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ENCINITAS

GARCIA, ROSEMARIE
Provider Gender: Female
License Number: MFC123590
NPI: 1710410980
Provider English Spoken: Y
Cultural Competency: N
ROSEMARIE C GARCIA
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GOMEZ, JUANITA
Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
JUANITA GOMEZ
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LOPEZ, JOANNA
Provider Gender: Female
License Number: MFC50381
NPI: 1275664385
Provider English Spoken: Y
Cultural Competency: N
JOANNA M LOPEZ
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ESCONDIDO

ARLINGHAUS, RENE
Provider Gender: Female
License Number: LCS80909
NPI: 1568973964
Provider English Spoken: Y
Cultural Competency: N
RENE M ARLINGHAUS
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

BECKMAN, KARI
Provider Gender: Female
License Number: LCS121629
NPI: 1861243271
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
KARI L BECKMAN
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CASTILLO, TRINIDAD
Provider Gender: Female
License Number: LCS116651
NPI: 1508472911
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
TRINIDAD J CASTILLO
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CASTILLO, TRINIDAD
Provider Gender: Female
License Number: LCS116651
NPI: 1508472911
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
TRINIDAD J CASTILLO
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Phone: (760) 466-9800
Fax: (360) 462-2741
After Hours Phone: (760) 466-9800
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, German
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FU, KATHERINE
Provider Gender: Female
License Number: A187562
NPI: 1356877807
Provider English Spoken: Y
Cultural Competency: N
KATHERINE FU
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

KAHLY, BROOKE
Provider Gender: Female
License Number: LCS84367
NPI: 1649833120
Provider English Spoken: Y
Cultural Competency: N
BROOKE N KAHLY
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LIM, STEVE
Provider Gender: Male
License Number: LCS122638
NPI: 1194590091
Provider English Spoken: Y
Cultural Competency: N
STEVE S LIM

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (760) 466-1373
After Hours Phone: (760) 520-8100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Farsi, French, Urdu, Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MARTINEZ, NORAYMA
Provider Gender: Female
License Number: LCS100019
NPI: 1669808267
Provider English Spoken: Y
Cultural Competency: N
NORAYMA MARTINEZ
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MCGHEE, JULEA
Provider Gender: Female
License Number: A95593
NPI: 1417016304
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
JULEA L MCGHEE
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MORAN, CHRISTINA
Provider Gender: Female
License Number: PSY25925
NPI: 1063661577
Provider English Spoken: Y
Cultural Competency: N
CHRISTINA M MORAN
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\18
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

PENT, MICHELLE
Provider Gender: Female
License Number: C55145
NPI: 1275627655
Provider English Spoken: Y
Cultural Competency: N
MICHELLE P PENT
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PRASAD, AMITHA
Provider Gender: Female
License Number: A158657
NPI: 1821436882
Provider English Spoken: Y
Cultural Competency: N
AMITHA PRASAD
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 294-9270
Fax: (760) 294-9268
After Hours Phone: (760) 294-9270
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RIOS, SIERRA
Provider Gender: Female
License Number: LCS91970
NPI: 1942746128
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
SIERRA K RIOS
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RIVERA, MELISSA
Provider Gender: Female
License Number: MFC131285
NPI: 1184171720
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
MELISSA N RIVERA
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

STONE, CALVIN
Provider Gender: Male
License Number: 20A18127
NPI: 1275995870
Provider English Spoken: Y
Cultural Competency: N
CALVIN T STONE
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA
Provider Gender: Female
License Number: PSY31075
NPI: 1932308442
Provider English Spoken: Y
Cultural Competency: N
ALYSSA TEETER-WITT
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\18
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA
Provider Gender: Female
License Number: PSY31075
NPI: 1932308442
Provider English Spoken: Y
Cultural Competency: N
ALYSSA TEETER-WITT
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (858) 633-4693
After Hours Phone: (760) 690-5900
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\18
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VENNAM, VAMSI KRISHNA
Provider Gender: Male
License Number: 20A19415
NPI: 1679070569
Provider English Spoken: Y
Cultural Competency: N
VAMSI KRISHNA VENNAM
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y

TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

VERCHER, ROSHON
Provider Gender: Male
License Number: LCS101363
NPI: 1316611288
Provider English Spoken: Y
Cultural Competency: N
ROSHON VERCHER
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ZUNIGA, ROSA
Provider Gender: Female
License Number: MFC106093
NPI: 1932411436
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ROSA ZUNIGA
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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: CONTACT PROVIDER

MAGEE, ANNA
Provider Gender: Female
License Number: LCS107407
NPI: 1194234609
Provider English Spoken: Y
Cultural Competency: N

ANNA M MAGEE
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MAURIZ, GRAZIANO
Provider Gender: Male
License Number: LCS78433
NPI: 1962654327
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
GRAZIANO M MAURIZ
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM TU-F 8:30AM-5PM

MCAULEY, ROBERT
Provider Gender: Male
License Number: G23317
NPI: 1194881888
Provider English Spoken: Y
Cultural Competency: N
ROBERT A MCAULEY
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4730
Fax: (760) 457-4700
After Hours Phone: (760) 451-4730
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MILES, RENEE
Provider Gender: Female
License Number: LCS70204
NPI: 1053763623
Provider English Spoken: Y
Cultural Competency: N
RENEE S MILES
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WAGONER, KENYADA
Provider Gender: Female

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

License Number: LCS114731
NPI: 1760172688
Provider English Spoken: Y
Cultural Competency: N
KENYADA M WAGONER
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 11\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

IMPERIAL BEACH

WALSH, EMILY
Provider Gender: Female
License Number: MFC141158
NPI: 1134769490
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
EMILY A WALSH
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LA JOLLA

BACANI, AMY
Provider Gender: Female
License Number: MFC39634
NPI: 1073586863
Provider English Spoken: Y
Cultural Competency: N
AMY D BACANI
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BOOTH, CHRISTOPHER
Provider Gender: Male
License Number: PSY26073
NPI: 1568893162
Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER R BOOTH
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

CRANDAL, BRENT

Provider Gender: Male

License Number: PSY26294

NPI: 1588739452

Provider English Spoken: Y

Cultural Competency: N

BRENT R CRANDAL

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800) 926-8372

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

DHILLON, RACHEL

Provider Gender: Female

License Number: A178513

NPI: 1992281026

Provider English Spoken: Y

Cultural Competency: N

RACHEL E DHILLON

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (858) 554-1212

Fax: (888) 539-8781

After Hours Phone: (858) 554-1212

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364

Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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: CONTACT PROVIDER

Hours: M-F 8AM-5PM

EGAN, KAITLYN

Provider Gender: Female

License Number: PSY32214

NPI: 1629653860

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

Accessibility: CONTACT PROVIDER

ELLEDGE, LINDSAY

Provider Gender: Female

License Number: LCS96136

NPI: 1619428828

Provider English Spoken: Y

Cultural Competency: N

LINDSAY E ELLEDGE

8950 VILLA LA JOLLA DR STE 101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FINN, DAPHNA

Provider Gender: Female

License Number: A152291

NPI: 1639522725

Provider English Spoken: Y

Cultural Competency: N

DAPHNA M FINN

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

HENDRIE, KYLE

Provider Gender: Male

License Number: 20A21374

NPI: 1720549827

Provider English Spoken: Y

Cultural Competency: N

KYLE A HENDRIE

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

HOLMBERG, CARRIE

Provider Gender: Female

License Number: A122061

NPI: 1164714143

Provider English Spoken: Y

Cultural Competency: N

CARRIE HOLMBERG

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

KOHLI, KANCHAN
Provider Gender: Female
License Number: C183282
NPI: 1235485343
Provider English Spoken: Y
Cultural Competency: N
KANCHAN K KOHLI
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LASSWELL, EVE
Provider Gender: Female
License Number: PSY30220
NPI: 1013483635
Provider English Spoken: Y
Cultural Competency: N
EVE N LASSWELL
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LEDBETTER, ALEX
Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LEE, DAVID
Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
DAVID J LEE
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LI, XIA
Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
XIA LI
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MAXWELL, BENJAMIN
Provider Gender: Male
License Number: A108124
NPI: 1740415926
Provider English Spoken: Y
Cultural Competency: N
BENJAMIN K MAXWELL
8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (858) 534-8019
Fax: (858) 534-6727
After Hours Phone: (858) 534-8019
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

MENDEZ, ANDRES
Provider Gender: Male
License Number: PSY28907
NPI: 1841482692
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ANDRES G MENDEZ
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MITCHELL, NORA
Provider Gender: Female
License Number: LCS88855
NPI: 1245607043
Provider English Spoken: Y
Cultural Competency: N
NORA K MITCHELL
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MOORE, SHAVON
Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MOORE, SHAVON
Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 826-8273
Fax: (888) 539-8781
After Hours Phone: (800) 826-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

NGUYEN, HOANG
Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
HOANG A NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 497-6673
After Hours Phone: (619) 497-6673
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

NGUYEN, JULIA
Provider Gender: Female
License Number: A193351
NPI: 1881155232
Provider English Spoken: Y
Cultural Competency: N
JULIA K NGUYEN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

PELHAM, WILLIAM
Provider Gender: Male
License Number: PSY33091
NPI: 1306629399
Provider English Spoken: Y
Cultural Competency: N
WILLIAM E PELHAM
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

QAYOUMI, WALI
Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken: French

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Cultural Competency: N
WALI Z QAYOUMI
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Phone: (858) 822-5881
Fax: (888) 539-8781
After Hours Phone: (858) 822-5881
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

QAYOUMI, WALI
Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
WALI Z QAYOUMI
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
Phone: (619) 284-3746
Fax: (888) 579-8781
After Hours Phone: (619) 284-3746
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RICHARD, MARLA
Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RICHARD, MARLA
Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD
9300 MEDIAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SCHNEEBERGER, ANDRES
Provider Gender: Male
License Number: C175502

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

NPI: 1184867376
Provider English Spoken: Y
Cultural Competency: N
ANDRES R SCHNEEBERGER
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TARLE, STEPHANIE
Provider Gender: Female
License Number: PSY32155
NPI: 1659920403
Provider English Spoken: Y
Cultural Competency: N
STEPHANIE J TARLE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TARVER, LESLIE
Provider Gender: Female
License Number: A169181
NPI: 1811300957
Provider English Spoken: Y
Cultural Competency: N
LESLIE B TARVER
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

THOMAS, KELSEY
Provider Gender: Female
License Number: PSY29738

NPI: 1700264264
Provider English Spoken: Y
Cultural Competency: N
KELSEY R THOMAS
8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

THOMAS, KELSEY
Provider Gender: Female
License Number: PSY29738
NPI: 1700264264
Provider English Spoken: Y
Cultural Competency: N
KELSEY R THOMAS
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WISHNEK, HANNAH
Provider Gender: Female
License Number: LCS105699
NPI: 1578012043
Provider English Spoken: Y
Cultural Competency: N
HANNAH K WISHNEK
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ZLATAR, ZVINKA
Provider Gender: Female
License Number: PSY26230
NPI: 1497139059
Provider English Spoken: Y
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: CONTACT PROVIDER
Hours: M-F 8AM-5PM

NATIONAL CITY

CHOI, MIN HU

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider Gender: Female
License Number: MFC135952
NPI: 1871195107
Provider English Spoken: Y
Cultural Competency: N
MIN HU CHOI
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 356-2726
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM

CHOI, MIN HU
Provider Gender: Female
License Number: MFC135952
NPI: 1871195107
Provider English Spoken: Y
Cultural Competency: N
MIN HU CHOI
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 356-2726
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM

LAD, NIKISHA
Provider Gender: Female
License Number: LCS120676
NPI: 1942857107
Provider English Spoken: Y
Cultural Competency: N
NIKISHA J LAD
2400 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8AM-5PM M-F 8AM-5PM

SACHS, MELISSA
Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS
2400 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SA 8AM-2:30PM

SIMMONS IV, ROBERT
Provider Gender: Male
License Number: LCS117787
NPI: 1689269631
Provider English Spoken: Y
Cultural Competency: N
ROBERT M SIMMONS IV
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 434-9853
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

SIMMONS IV, ROBERT
Provider Gender: Male
License Number: LCS117787
NPI: 1689269631
Provider English Spoken: Y
Cultural Competency: N
ROBERT M SIMMONS IV
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 434-9853
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8AM-6PM F 8AM-5PM

OCEANSIDE

BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Chinese, Farsi
TDD: U
Min/Max Age: 5\80
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U

Min/Max Age: 5\80
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 5\80
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

CHALMERS, VIRGINIA
Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
VIRGINIA C CHALMERS
619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

JENSEN, BRIAN
Provider Gender: Male
License Number: PSY26041
NPI: 1518138049
Provider English Spoken: Y
Cultural Competency: N
BRIAN M JENSEN
619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KRAPES, MICHAEL
Provider Gender: Male
License Number: PSY25077
NPI: 1215233028
Provider English Spoken: Y
Cultural Competency: N
MICHAEL B KRAPES
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\18
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MONTEZ, REBECCA
Provider Gender: Female
License Number: LCS26869
NPI: 1396047809
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
REBECCA MONTEZ
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ORTIZ, BEVERLY
Provider Gender: Female
License Number: MFC121355
NPI: 1760826572
Provider English Spoken: Y
Cultural Competency: N
BEVERLY L ORTIZ
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM
SA 9AM-4PM

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM
SA 9AM-4PM

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM
SA 9AM-4PM

RIVADENEYRA, KELLY
Provider Gender: Female
License Number: LCS122911
NPI: 1790242469
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
KELLY RIVADENEYRA
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
W-F 8AM-5PM

ROMANS, AURORA
Provider Gender: Female
License Number: MFC47430
NPI: 1548460132
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
AURORA J ROMANS
619 CROUCH ST STE 100
OCEANSIDE, CA 92054
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: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM

POWAY

DHAMIJA, ANISH
Provider Gender: Male
License Number: A158808
NPI: 1063946275
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
ANISH DHAMIJA
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858) 218-3000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MODHWADIA, MAMTA
Provider Gender: Female
License Number: A113990
NPI: 1043353667
Provider English Spoken: Y
Provider Language(s) Spoken: German, Gujarati
Cultural Competency: N
MAMTA D MODHWADIA
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858) 218-3000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 16\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

SAN DIEGO

ABERCROMBIE, SHERI
Provider Gender: Female
License Number: PSY18536
NPI: 1932292422
Provider English Spoken: Y
Cultural Competency: N
SHERI ABERCROMBIE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-4PM

ABERCROMBIE, SHERI
Provider Gender: Female
License Number: PSY18536
NPI: 1932292422
Provider English Spoken: Y
Cultural Competency: N
SHERI ABERCROMBIE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

APPELBAUM, BRUCE
Provider Gender: Male
License Number: G69512
NPI: 1528046463
Provider English Spoken: Y
Cultural Competency: N
BRUCE D APPELBAUM
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ARCEO, JACQUELINE
Provider Gender: Female
License Number: LCS110194
NPI: 1093350258
Provider English Spoken: Y
Cultural Competency: N
JACQUELINE C ARCEO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-9025
Fax: (858) 633-4680
After Hours Phone: (858) 279-9025
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ARCEO, JACQUELINE
Provider Gender: Female
License Number: LCS110194
NPI: 1093350258
Provider English Spoken: Y
Cultural Competency: N
JACQUELINE C ARCEO
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

BANKS, SARAH
Provider Gender: Female
License Number: PSY30296

NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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

BANKS, SARAH
Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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
Accessibility: CONTACT PROVIDER

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
Accessibility: CONTACT PROVIDER

BAQIR, HUMA
Provider Gender: Female
License Number: A188608
NPI: 1306499132
Provider English Spoken: Y
Cultural Competency: N
HUMA BAQIR
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BASS, GURGIANA
Provider Gender: Female
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
GURGIANA BASS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-4:30PM
TU 8AM-12PM
W 8AM-4:30PM
TH 8AM-12PM

BASS, GURGIANA
Provider Gender: Female
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
GURGIANA BASS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BREEDLOVE, AMANDA
Provider Gender: Female
License Number: MFC139230
NPI: 1316487119
Provider English Spoken: Y
Cultural Competency: N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

AMANDA A BREEDLOVE
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

BROWN, DARCIE
Provider Gender: Female
License Number: MFC119851
NPI: 1639796071
Provider English Spoken: Y
Cultural Competency: N
DARCIE D BROWN
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CABALLERO, NOE
Provider Gender: Male
License Number: A181276
NPI: 1407483480
Provider English Spoken: Y
Cultural Competency: N
NOE A CABALLERO
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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
Accessibility: CONTACT PROVIDER

CABALLERO, NOE
Provider Gender: Male
License Number: A181276
NPI: 1407483480
Provider English Spoken: Y

Cultural Competency: N
NOE A CABALLERO
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

CAZARES, DARIANA
Provider Gender: Female
License Number: LCS100887
NPI: 1609390665
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
DARIANA CAZARES
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 7\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHESHER, NICHOLAS
Provider Gender: Male
License Number: PSY29290
NPI: 1124539697
Provider English Spoken: Y
Cultural Competency: N
NICHOLAS J CHESHER
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CHOI, MIN HU

Provider Gender: Female
License Number: MFC135952
NPI: 1871195107
Provider English Spoken: Y
Cultural Competency: N
MIN HU CHOI
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM

CIOBANU, COSMINA
Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CIOBANU, COSMINA
Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
Fax: (858) 966-8164
After Hours Phone: (858) 576-1700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CIOBANU, COSMINA
Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
Fax: (858) 966-8164
After Hours Phone: (858) 576-1700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CIOBANU, COSMINA
Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 576-1700
Fax: (858) 966-8164
After Hours Phone: (858) 576-1700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CLEMENT, LUIS
Provider Gender: Male
License Number: PSY28534
NPI: 1235364712
Provider English Spoken: Y
Cultural Competency: N
LUIS F CLEMENT
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CRISOL, CAROLINE
Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
CAROLINE M CRISOL
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DEACON, CASSIE
Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

DEACON, CASSIE
Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

DHAMIJA, ANISH
Provider Gender: Male
License Number: A158808
NPI: 1063946275
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
ANISH DHAMIJA
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (877) 673-1361
After Hours Phone: (619) 429-3733
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

DIAZ, JAENAI
Provider Gender: Female
License Number: LCS80689
NPI: 1508241811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
JAENAI DIAZ
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DOSS, KATIE
Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L DOSS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

DOSS, KATIE
Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L DOSS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

DSOUZA, NICOLE
Provider Gender: Male
License Number: LCS101958
NPI: 1225462799
Provider English Spoken: Y
Cultural Competency: N
NICOLE A DSOUZA
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DUNN-PIRIO, ANASTASIE
Provider Gender: Female
License Number: A157861
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N

ANASTASIE M DUNN-PIRIO
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781
After Hours Phone: (619) 543-3500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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

ESTAVILLO, SAUL
Provider Gender: Male
License Number: MFC102610
NPI: 1528330073
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
SAUL J ESTAVILLO
286 EUCLID AVE STE 309
SAN DIEGO, CA 92114
Phone: (619) 527-7390
Fax: (619) 527-7394
After Hours Phone: (619) 527-7390
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ESTAVILLO, SAUL
Provider Gender: Male
License Number: MFC102610
NPI: 1528330073
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
SAUL J ESTAVILLO
3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154
Phone: (619) 662-4161
Fax: (619) 662-4109
After Hours Phone: (619) 662-4161
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM

FIRESTONE, MICHELLE
Provider Gender: Female
License Number: PSY33081
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
MICHELLE E FIRESTONE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FIRESTONE, MICHELLE
Provider Gender: Female
License Number: PSY33081
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
MICHELLE E FIRESTONE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FORZANI, CHRISTINA
Provider Gender: Female
License Number: PSY25710
NPI: 1902939630
Provider English Spoken: Y
Cultural Competency: N
CHRISTINA A FORZANI
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FRANK, GUIDO
Provider Gender: Male
License Number: A86429
NPI: 1578608733
Provider English Spoken: Y
Cultural Competency: N
GUIDO K FRANK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8145
Fax: (858) 966-8154
After Hours Phone: (858) 966-8145
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FRY, LIANE
Provider Gender: Female
License Number: MFC42570
NPI: 1003110917
Provider English Spoken: Y
Cultural Competency: N
LIANE M FRY
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GARCIA, RICHARD
Provider Gender: Male
License Number: LCS28742
NPI: 1881198554
Provider English Spoken: Y
Cultural Competency: N
RICHARD R GARCIA
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-4:30PM

GARCIA, JENNI
Provider Gender: Female
License Number: LPCC10346
NPI: 1437775863
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
JENNI GARCIA
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (619) 662-4100
Fax: (619) 662-4119
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

GIAMONA, KRISTEN
Provider Gender: Female
License Number: PSY28419
NPI: 1376824383
Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419

NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

JUANITA GOMEZ

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800) 926-8372

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GULOTTA, SAMANTHA

Provider Gender: Female

License Number: MFC134199

NPI: 1790407732

Provider English Spoken: Y

Cultural Competency: N

SAMANTHA L GULOTTA

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

JOSHI, YASH

Provider Gender: Male

License Number: A147156

NPI: 1598151433

Provider English Spoken: Y

Cultural Competency: N

YASH B JOSHI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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

KHAFAJA, MOHAMAD
Provider Gender: Male
License Number: A115892
NPI: 1780867119
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
MOHAMAD H KHAFAJA
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

KHAFAJA, MOHAMAD
Provider Gender: Male
License Number: A115892
NPI: 1780867119
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
MOHAMAD H KHAFAJA
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KHAMISA, SORAIYA
Provider Gender: Female
License Number: LCS81951
NPI: 1811254386
Provider English Spoken: Y
Cultural Competency: N
SORAIYA N KHAMISA
4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KLIGIS, GABRIELLE
Provider Gender: Female
License Number: LCS125570
NPI: 1346802550
Provider English Spoken: Y
Cultural Competency: N
GABRIELLE L KLIGIS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender

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

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

KLUEMPER, NICOLE
Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 2\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KLUEMPER, NICOLE
Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 2\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KOHLI, KANCHAN
Provider Gender: Female
License Number: C183282
NPI: 1235485343
Provider English Spoken: Y
Cultural Competency: N
KANCHAN K KOHLI
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender

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

KRUCKENBERG, KATHERINE
Provider Gender: Female
License Number: A184317
NPI: 1518595826
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M KRUCKENBERG
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KRUCKENBERG, KATHERINE
Provider Gender: Female
License Number: A184317
NPI: 1518595826
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M KRUCKENBERG
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KRUCKENBERG, KATHERINE
Provider Gender: Female
License Number: A184317
NPI: 1518595826
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M KRUCKENBERG
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KRUCKENBERG, KATHERINE
Provider Gender: Female
License Number: A184317
NPI: 1518595826
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M KRUCKENBERG
16918 DOVE CANYON RD STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LAIDLAW, JOHN
Provider Gender: Male
License Number: MFC44560
NPI: 1689790073
Provider English Spoken: Y
Cultural Competency: N
JOHN K LAIDLAW
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 474-4008
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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
Accessibility: CONTACT PROVIDER

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
Accessibility: CONTACT PROVIDER

LEE, DAVID
Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
DAVID J LEE
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender

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

LI, XIA
Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
XIA LI
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LI, XIA
Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
XIA LI
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LIU, TIMOTHY
Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese
Cultural Competency: N
TIMOTHY C LIU
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LIU, TIMOTHY
Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese
Cultural Competency: N
TIMOTHY C LIU
7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LONGARDNER, KATHERINE
Provider Gender: Female
License Number: A137963
NPI: 1801215926
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M LONGARDNER
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LUNDEBERG, HOLLY
Provider Gender: Female
License Number: LCSW119125
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LUNDEBERG, HOLLY
Provider Gender: Female
License Number: LCSW119125
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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N

LAWRENCE T MALAK
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 14\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-2PM

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787

NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

MCCULLUM, TIFFANY
Provider Gender: Female
License Number: PSY29329
NPI: 1528306206
Provider English Spoken: Y
Cultural Competency: N
TIFFANY MCCULLUM
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 428-7952
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 13\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MEIER, EMILY
Provider Gender: Female
License Number: Psy25266
NPI: 1255530572
Provider English Spoken: Y
Cultural Competency: N
EMILY A MEIER
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MILLS, BRAD
Provider Gender: Male
License Number: LCS87409
NPI: 1598542813
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
BRAD A MILLS
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MIRON, JEAN-PHILIPPE
Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y
Cultural Competency: N
JEAN-PHILIPPE MIRON
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MIRON, JEAN-PHILIPPE
Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y
Cultural Competency: N
JEAN-PHILIPPE MIRON
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MIRON, JEAN-PHILIPPE
Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y
Cultural Competency: N
JEAN-PHILIPPE MIRON
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER

MONTOYA, JESSICA
Provider Gender: Female
License Number: PSY31647
NPI: 1003421256
Provider English Spoken: Y
Cultural Competency: N
JESSICA L MONTOYA
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MOORE, SHAVON
Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MUHAMMAD, LAMA
Provider Gender: Female
License Number: A156500
NPI: 1558701623
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
LAMA MUHAMMAD
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

MUHAMMAD, LAMA
Provider Gender: Female
License Number: A156500
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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

NAKAMURA, TIFFANY

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349

Provider English Spoken: Y

Cultural Competency: N

TIFFANY NAKAMURA

4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858) 534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

NAKAMURA, TIFFANY

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349

Provider English Spoken: Y

Cultural Competency: N

TIFFANY NAKAMURA

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

HOANG A NGUYEN

410 DICKINSON ST STE 100
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

HOANG A NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender

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

NGUYEN, JULIA
Provider Gender: Female
License Number: A193351
NPI: 1881155232
Provider English Spoken: Y
Cultural Competency: N
JULIA K NGUYEN
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NGUYEN, JULIA
Provider Gender: Female
License Number: A193351
NPI: 1881155232
Provider English Spoken: Y
Cultural Competency: N
JULIA K NGUYEN
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NORMAN, MARC
Provider Gender: Male
License Number: PSY16278
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
MARC A NORMAN
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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

ORFF, HENRY
Provider Gender: Male
License Number: PSY27099
NPI: 1144685215
Provider English Spoken: Y
Cultural Competency: N
HENRY J ORFF
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (844) 757-5337
After Hours Phone: (844) 757-5337
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ORTIZ, MARIA
Provider Gender: Female
License Number: PSY30953
NPI: 1497980775
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
MARIA E ORTIZ
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PASTORES, GLEN
Provider Gender: Male
License Number: MFC94162
NPI: 1609980234
Provider English Spoken: Y
Cultural Competency: N
GLEN F PASTORES
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PATTON, MICHAEL
Provider Gender: Male
License Number: LCS18244
NPI: 1184756702
Provider English Spoken: Y
Cultural Competency: N
MICHAEL A PATTON
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PRINCE, RENEE
Provider Gender: Female
License Number: PSY32206
NPI: 1467737908
Provider English Spoken: Y
Cultural Competency: N
RENEE K PRINCE
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 474-4008
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-6PM

QAYOUMI, WALI
Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
WALI Z QAYOUMI
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (619) 294-3746
Fax: (888) 539-8781
After Hours Phone: (619) 294-3746
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RADOJEVIC, NATASHA
Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM

RADOJEVIC, NATASHA
Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM

REINEKE, ANKE
Provider Gender: Female
License Number: PSY22669
NPI: 1205154747
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
ANKE REINEKE
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6974
Fax: (858) 966-6721
After Hours Phone: (858) 966-6974
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

REINEKE, ANKE
Provider Gender: Female
License Number: PSY22669
NPI: 1205154747
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
ANKE REINEKE
8060 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-6974
Fax: (858) 966-6721
After Hours Phone: (858) 966-6974
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RIBEIRO CALDAS DOMINGUES, ISABEL
Provider Gender: Female
License Number: A132160
NPI: 1023367216
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
ISABEL A RIBEIRO CALDAS DOMINGUES
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RICHARD, MARLA
Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RICHARD, MARLA
Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RIVERA, KEVIN JOHN
Provider Gender: Male
License Number: A193862
NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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

RIVERA, KEVIN JOHN
Provider Gender: Male
License Number: A193862

NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RIVERA, KEVIN JOHN
Provider Gender: Male
License Number: A193862
NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RIVERA, KEVIN JOHN
Provider Gender: Male
License Number: A193862
NPI: 1760986715
Provider English Spoken: Y
Cultural Competency: N
KEVIN JOHN R RIVERA
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SACHS, MELISSA
Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM

SALO, STEPHANIE
Provider Gender: Female
License Number: PSY26290
NPI: 1477967784

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Provider English Spoken: Y
Cultural Competency: N
STEPHANIE P SALO
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 17\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
3665 KEARNY VILLA RD STE 400
SAN DIEGO, CA 92123
Phone: (858) 966-5990
Fax: (858) 966-7508
After Hours Phone: (858) 966-5990
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 246-0794
Fax: (858) 496-9257
After Hours Phone: (858) 246-0794
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON
Provider Gender: Female

License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 246-1979
After Hours Phone: (858) 246-1979
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Phone: (858) 246-1979
After Hours Phone: (858) 246-1979
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SCHLOSSER, TARA
Provider Gender: Female
License Number: MFC107868
NPI: 1407220437
Provider English Spoken: Y
Cultural Competency: N
TARA S SCHLOSSER
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SCHNEEBERGER, ANDRES
Provider Gender: Male
License Number: C175502
NPI: 1184867376
Provider English Spoken: Y
Cultural Competency: N

ANDRES R SCHNEEBERGER
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SERIO, TAYLOR
Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y
Cultural Competency: N
TAYLOR L SERIO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SERIO, TAYLOR
Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y
Cultural Competency: N
TAYLOR L SERIO
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SHU, I WEI
Provider Gender: Male
License Number: A103813
NPI: 1992840144
Provider English Spoken: Y
Cultural Competency: N
I WEI SHU
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 534-6200
Fax: (858) 534-6205
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SUAREZ, ROBERTO
Provider Gender: Male
License Number: MFC25098
NPI: 1386785160
Provider English Spoken: Y
Provider Language(s) Spoken:

Spanish
Cultural Competency: N
ROBERTO SUAREZ
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (619) 662-4100
Fax: (619) 662-4119
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 6\21
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
PAIGE A SUTHERLAND
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SUTHERLAND, PAIGE
Provider Gender: Female
License Number: A178168
NPI: 1235767245
Provider English Spoken: Y
Cultural Competency: N
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
Accessibility: CONTACT PROVIDER

SWEIGERT, JAMIE
Provider Gender: Female
License Number: LCS112304
NPI: 1396353595
Provider English Spoken: Y
Cultural Competency: N
JAMIE L SWEIGERT
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

TARLE, STEPHANIE
Provider Gender: Female
License Number: PSY32155
NPI: 1659920403
Provider English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Cultural Competency: N
STEPHANIE J TARLE
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

THACKABERRY, JESSICA
Provider Gender: Female
License Number: A128967
NPI: 1134478910
Provider English Spoken: Y
Cultural Competency: N
JESSICA L THACKABERRY
6645 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TILTON, PETER
Provider Gender: Male
License Number: G27781
NPI: 1538258694
Provider English Spoken: Y
Cultural Competency: N
PETER A TILTON
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TO, TUAN
Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
TUAN TO
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TO, TUAN
Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken:

Vietnamese
Cultural Competency: N
TUAN TO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TO, TUAN
Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
TUAN TO
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 8AM-2PM

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

TWAMLEY, ELIZABETH
Provider Gender: Female
License Number: PSY19150
NPI: 1700089141
Provider English Spoken: Y
Cultural Competency: N
ELIZABETH W TWAMLEY
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5PM
TH 8:30AM-9PM
F 8:30AM-5PM

VALLIDO, CHRISTIAN
Provider Gender: Male
License Number: MFC131734
NPI: 1992433049
Provider English Spoken: Y
Cultural Competency: N
CHRISTIAN 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
Accessibility: CONTACT PROVIDER

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
Accessibility: CONTACT PROVIDER

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Accessibility: CONTACT PROVIDER

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

Accessibility: CONTACT PROVIDER

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

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

WEISSMAN, CORY

Provider Gender: Male

License Number: A174625

NPI: 1528720661

Provider English Spoken: Y

Cultural Competency: N

CORY R WEISSMAN

16918 DOVE CANYON RD STE 100
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

WU, MICHELLE
Provider Gender: Female
License Number: A125139
NPI: 1043650088
Provider English Spoken: Y
Cultural Competency: N
MICHELLE L WU
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8145
Fax: (858) 966-8164
After Hours Phone: (858) 966-8145
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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
Accessibility: CONTACT PROVIDER

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

FLYNN, DANIELLE
Provider Gender: Female
License Number: PSY26184
NPI: 1477785137
Provider English Spoken: Y
Cultural Competency: N
DANIELLE I FLYNN
150 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
Accessibility: CONTACT PROVIDER

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: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

RIVADENEYRA, KELLY
Provider Gender: Female
License Number: LCS122911
NPI: 1790242469
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
KELLY RIVADENEYRA
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: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

RODRIGUEZ MELENDEZ, DAVIS
Provider Gender: Male
License Number: LCS111804
NPI: 1750724100
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
DAVIS RODRIGUEZ MELENDEZ
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

WEBER, SARA
Provider Gender: Female
License Number: MFC121580
NPI: 1891856381
Provider English Spoken: Y
Cultural Competency: N
SARA J WEBER
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: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

SAN YSIDRO

BALTRUS, JUSTINE ANN
Provider Gender: Female
License Number: MFC132018
NPI: 1285040709
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
JUSTINE ANN M BALTRUS
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

CRAWFORD-DAY, ANN
Provider Gender: Female
License Number: A166646
NPI: 1386149706
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
ANN E CRAWFORD-DAY
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
SA 8AM-2PM

DEPAOLO, AMANDA
Provider Gender: Female
License Number: LCS99056
NPI: 1215420138
Provider English Spoken: Y
Cultural Competency: N
AMANDA L DEPAOLO
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

FONTANA, LOUIS
Provider Gender: Male
License Number: G49072
NPI: 1780734343
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
LOUIS A FONTANA
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM
SA 8AM-2PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER

JENNINGS, AMY
Provider Gender: Female
License Number: LCS100075
NPI: 1609549161
Provider English Spoken: Y
Cultural Competency: N
AMY E JENNINGS
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-2PM

JIMENEZ, NANCY
Provider Gender: Female
License Number: MFC141209
NPI: 1568023596
Provider English Spoken: Y
Cultural Competency: N
NANCY JIMENEZ
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

LOPEZ, MARIBEL
Provider Gender: Female
License Number: LCS86171
NPI: 1669180600
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
MARIBEL LOPEZ
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-2PM

PETERSEN, KATE
Provider Gender: Female
License Number: MFC130200
NPI: 1598237281
Provider English Spoken: Y
Cultural Competency: N
KATE PETERSEN
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

TAPIA, ASHLEY
Provider Gender: Female
License Number: LCS118965
NPI: 1952821472
Provider English Spoken: Y
Cultural Competency: N
ASHLEY TAPIA
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 12\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

ZAYAS, MARIO
Provider Gender: Male
License Number: MFC111273
NPI: 1275943557
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
MARIO E ZAYAS
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 6\21
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 9AM-7PM W-F 9AM-6PM

SANTEE

MEAGHER, RAISHELLE
Provider Gender: Female
License Number: LCS109804
NPI: 1851821904
Provider English Spoken: Y
Cultural Competency: N
RAISHELLE L MEAGHER
120 TOWN CENTER PKWY
SANTEE, CA 92071

Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

VALLEY CENTER

PLASCENCIA, CINDY
Provider Gender: Female
License Number: MFC113536
NPI: 1952723736
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
CINDY PLASCENCIA
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VISTA

BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu
TDD: U
Min/Max Age: 5\80
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

BELL, JENNIFER
Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Lithuanian, Urdu, Chinese, Vietnamese, Farsi, Tagalog, Arabic, Spanish
TDD: U
Min/Max Age: 5\80
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM SA 9AM-4PM

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10AM-7PM W-F 8AM-5PM SA 9AM-4PM

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM TU 10AM-7PM W-F 8AM-5PM SA 9AM-4PM

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

ل. مقدمي خدمات النظر

ALPINE

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777

NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

MARYOUNG, ALLISON, OD
Provider Gender: Female
License Number: 35512
NPI: 1083309124
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM

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

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117

ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

Fax: (619) 475-3456
After Hours Phone: (619) 479-7334
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-6:30PM
W 8AM-6PM
TH 8AM-1PM
F 8AM-6PM
SA 9AM-2PM

Phone: (760) 606-2020
After Hours Phone: (760) 606-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: TU 9AM-5PM
W 10AM-6PM
TH 9AM-5PM
F 8AM-4PM
SA 9AM-3PM

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

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

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 8:30AM-5PM
TH 10:30AM-7PM
F 8:30AM-5PM

THAN, CINDY, OD
Provider Gender: Female
License Number: 13602
NPI: 1316103633
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
PIER VISION OPTOMETRY
2525 EL CAMINO REAL STE 125
CARLSBAD, CA 92008
Phone: (760) 912-5552
Fax: (619) 996-0700
After Hours Phone: (760) 912-5552
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: TU-F 11AM-6PM
SA 11AM-6PM

CHULA VISTA

CASTILLEJOS, DAVID, MD
Provider Gender: Male
License Number: A44482
NPI: 1558446401
Provider English Spoken: Y
Provider Language(s) Spoken: French, Portuguese, Spanish, Tagalog
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

CASTILLEJOS, MARIA, MD
Provider Gender: Female
License Number: A37652
NPI: 1043395098
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

CHAN, KWOK FUNG, OD
Provider Gender: Male
License Number: 35087
NPI: 1407508385
Provider English Spoken: Y
Cultural Competency: Y
VILLA OPTOMETRY INC
523 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Phone: (619) 482-2020
Fax: (619) 482-2671
After Hours Phone: (619) 482-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 11AM-6PM
TH-F 9AM-6PM

CHISHOLM, KAREN, OD
License Number: 35450
NPI: 1568155190
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

HUANG, PETER, OD
Provider Gender: Male
License Number: 11659
NPI: 1639100522
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
PETER D HUANG OD INC
557 H ST
CHULA VISTA, CA 91910
Phone: (619) 422-0139
Fax: (619) 422-0066
After Hours Phone: (619) 422-0139
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM

TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 8AM-4PM
SA 9AM-2PM

KALRA, ANKUR, OD
Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

KEDDINGTON, JOAN, OD
Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

KIM, JENNY, OD
Provider Gender: Female
License Number: 35831
NPI: 1497588362
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM

M-F 9AM-7PM
SA 9AM-5PM

KING, MARY, OD
Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

MASCARENO, EFRAIN, OD
Provider Gender: Male
License Number: 10906
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: Y
CLEAR VISION OPTOMETRY DR MASCARENO
440 4TH AVE
CHULA VISTA, CA 91910
Phone: (619) 427-2020
Fax: (866) 254-5707
After Hours Phone: (619) 427-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 9AM-6PM
F 9AM-5PM

NGUYEN, THERESA, OD
Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

NGUYEN, TRACY, OD
Provider Gender: Female
License Number: 10859
NPI: 1265596621
Provider English Spoken: Y
Provider Language(s) Spoken:

Vietnamese
Cultural Competency: Y
ESSENTIAL EYECARE OPTOMETRY
345 F ST STE 240
CHULA VISTA, CA 91910
Phone: (858) 467-0655
Fax: (619) 425-9797
After Hours Phone: (858) 467-0655
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 10AM-3PM

OSSAREH, DIBA, OD
Provider Gender: Female
License Number: 35830
NPI: 1235816067
Provider English Spoken: Y
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

PHAM, NINA, OD
Provider Gender: Female
License Number: 35360
NPI: 1598403867
Provider English Spoken: Y
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

SCOVILL, ALEXANDRA, OD
Provider Gender: Female
License Number: 33711
NPI: 1184146094
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

TOUBIA, ELIAS, OD
Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

TRINH, RACHELLE, OD

Provider Gender: Female

License Number: 35531

NPI: 1467139287

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

VILLA, ANGELICA, OD

Provider Gender: Female

License Number: 10561

NPI: 1962544965

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

VILLA OPTOMETRY INC

523 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910

Phone: (619) 482-2020

Fax: (619) 482-2671

After Hours Phone: (619) 482-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM
W 11AM-6PM
TH-F 9AM-6PM

CORONADO

COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619) 437-4406

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

GRAY, IGA, MD
Provider Gender: Female
License Number: A174875
NPI: 1033538350
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

KATZMAN, LEE, MD
Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

MANNEN, JOSEPH, OD
Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

OU, JOCELYN, OD
Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

YOUNG, ALLA, OD
Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-4:30PM

EL CAJON

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

ASIS, STEPHANIE, OD
Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850

NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

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
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

BUTLER, KIM, OD
Provider Gender: Male
License Number: 6405
NPI: 1467444844
Provider English Spoken: Y
Cultural Competency: Y
KIM J BUTLER OD
1273 BROADWAY
EL CAJON, CA 92021
Phone: (619) 579-2345
Fax: (619) 579-0876
After Hours Phone: (619) 579-2345
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-12AM

CHAN, KWOK FUNG, OD
Provider Gender: Male
License Number: 35087
NPI: 1407508385
Provider English Spoken: Y
Cultural Competency: Y
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Italian, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

HAN, SULKI, OD
Provider Gender: Female
License Number: 34171
NPI: 1750802195
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

HSU, CHRISTOPHER, MD
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

MARYOUNG, ALLISON, OD
Provider Gender: Female
License Number: 35512
NPI: 1083309124
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Hours: M-F 8:30AM-6PM

MCMURREN, BRITTANY, OD
Provider Gender: Female
License Number: 14824
NPI: 1104243815
Provider English Spoken: Y
Cultural Competency: Y
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Italian, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619)

440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y

Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

TONNU, ANH, OD
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

WERNER, 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: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

WERNER, 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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ *Phone: (619) 440-5400*
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6PM

ENCINITAS

ADAMS, MONA, OD
Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
☎ *Phone: (858) 309-7702*
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ *Phone: (760) 943-7141*
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ *Phone: (760) 943-7141*
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

Hours: M-F 8AM-5PM

BANSAL, PREETI, MD
Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

CHANG, TOM, MD
Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

LEE, JASON, OD
Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MOLL, ANGELA, MD
Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

SAMUEL, MICHAEL, MD
Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177

NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ESCONDIDO

ADAMS, MONA, OD
Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

ASIS, STEPHANIE, OD
Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BANSAL, PREETI, MD
Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

BEAUDRY, AMANDA, OD
Provider Gender: Female
License Number: 33385
NPI: 1477903516
Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

BERGMARK, JAMIE, OD
Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHANG, TOM, MD
Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHAU, VIVIAN, OD
Provider Gender: Female
License Number: 35427
NPI: 1558052951
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

DUONG, KIM, OD
Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HSU, CHRISTOPHER, MD
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within

1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KARAPETIAN, ELENA, OD
Provider Gender: Female
License Number: 34514
NPI: 1184250417
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KLAREN, AMANDA, OD
Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 9AM-5:30PM F 9AM-1PM

LEE, JASON, OD
Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

MARYOUNG, ALLISON, OD
Provider Gender: Female
License Number: 35512
NPI: 1083309124
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MOLL, ANGELA, MD
Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MOVAGHAR, MANSOOR, MD
Provider Gender: Male
License Number: A100897
NPI: 1497792220
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F

8:30AM-4:30PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

PANSARA, MEGHA, MD
Provider Gender: Female
License Number: A143429
NPI: 1184983728
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

SAMUEL, MICHAEL, MD
Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

THACH, TERILYN, OD
Provider Gender: Female
License Number: 11456
NPI: 1710030861
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
INSIGHT VISION OPTOMETRY
2419 E VALLEY PKWY
ESCONDIDO, CA 92027
Phone: (760) 738-9931
Fax: (760) 888-2181
After Hours Phone: (760) 738-9931
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9:30AM-5PM
TH 10AM-6PM
F 9:30AM-5PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TRAN, ALEXANDER, OD
Provider Gender: Male
License Number: 14136
NPI: 1902414790
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY

STE 200
ESCONDIDO, CA 92029
☎ *Phone: (760) 755-7600*
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

VERRET, ERIC, OD
Provider Gender: Male
License Number: 11401
NPI: 1194891853
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: Y
ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025
☎ *Phone: (760) 747-7979*
Fax: (760) 747-7799
After Hours Phone: (760) 747-7979
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, French, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM W-TH 9AM-8PM F 9AM-5PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
☎ *Phone: (760) 743-5872*
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
☎ *Phone: (760) 743-5872*
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

FALLBROOK

ARCHIBALD, JOHN, OD
Provider Gender: Male
License Number: 11813
NPI: 1902893357
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

COLEMAN, BROOKE, OD
Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

CONNOR, JEFFREY, OD
Provider Gender: Male
License Number: 33683
NPI: 1063968980
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728

Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

COOPER, MICHAEL, OD
Provider Gender: Male
License Number: 10476
NPI: 1164586244
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

DUONG, CHERYL, OD
Provider Gender: Female
License Number: 34070
NPI: 1366935678
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

GEORGE, KENDALL, OD
Provider Gender: Male
License Number: 34270
NPI: 1619529948
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
1102 S MAIN AVE
FALLBROOK, CA 92028
Phone: (760) 723-8417
Fax: (760) 758-2063
After Hours Phone: (760) 723-8417
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 1PM-5PM
W 9AM-6PM
F 1PM-5PM

GEORGE, BRUCE, OD
Provider Gender: Male
License Number: 7696
NPI: 1356414551
Provider English Spoken: Y
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
1102 S MAIN AVE
FALLBROOK, CA 92028
Phone: (760) 723-8417
Fax: (760) 758-2063
After Hours Phone: (760) 723-8417
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 1PM-5PM
W 9AM-6PM
F 1PM-5PM

KHINDA, SUNEHA, OD
Provider Gender: Female
License Number: 35494
NPI: 1750066726
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

NOORI, SARA, OD
Provider Gender: Female
License Number: 35457
NPI: 1477248912
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

TEW, JOHN, MD
Provider Gender: Male
License Number: A83206
NPI: 1174593354
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

IMPERIAL BEACH

HANONO, HELFON, OD
Provider Gender: Male
License Number: 6681
NPI: 1619942034
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
IMPERIAL BEACH
OPTOMETRY INC APC
894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone: (619) 424-9333
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM

HANONO, ABRAHAM, OD
Provider Gender: Male
License Number: 14900
NPI: 1356754741
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: Y
IMPERIAL BEACH
OPTOMETRY INC APC
894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone: (619) 424-9333
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM

LA JOLLA

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

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

CHONG, TAMMY, OD

Provider Gender: Female

License Number: 35841

NPI: 1700612975

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

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

CODEN, DANIEL, MD

Provider Gender: Male

License Number: G57587

NPI: 1942317508

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

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

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

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

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

HO, AMIEE, OD
Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

HO, AMIEE, OD
Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

HOO, PAMELA, OD
Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

HOO, PAMELA, OD
Provider Gender: Female

License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

JOMOC, CAITLIN, OD
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

JOMOC, CAITLIN, OD
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic

Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

LUSBY, FRANKLIN, MD
Provider Gender: Male
License Number: G41830
NPI: 1265526180
Provider English Spoken: Y
Cultural Competency: Y
LUSBY VISION INSTITUTE
9850 GENESEE AVE STE 220
LA JOLLA, CA 92037
Phone: (858) 459-6200
Fax: (858) 459-2025
After Hours Phone: (858) 459-6200
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MCCLEAN, ESMERALDA, OD
Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

MIZOGUCHI, LIANNE, OD
Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

MIZOGUCHI, LIANNE, OD
Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

MOOR, TRACY, OD
Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

PERRY, ARTHUR, MD
Provider Gender: Male
License Number: C37934
NPI: 1194832725
Provider English Spoken: Y
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

PRATT, STEVEN, MD
Provider Gender: Male
License Number: G32379
NPI: 1407963044
Provider English Spoken: Y
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

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

TONNU, ANH, OD
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

VO, ANDREW MINH, OD
Provider Gender: Male
License Number: 33869
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

PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

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

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

YU, CAROL, OD
Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM SA 8AM-2PM

YU, CAROL, OD
Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4:30PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

LA MESA

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ASIS, STEPHANIE, OD
Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License Number: A147199
NPI: 1679865950
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BAGHOUMIAN, MARINEH, OD
Provider Gender: Female
License Number: 14842
NPI: 1972929438
Provider English Spoken: Y
Provider Language(s) Spoken: Armenian
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

BUI, TINA, OD
Provider Gender: Female
License Number: 33435
NPI: 1497107312
Provider English Spoken: Y
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM SA 9AM-2PM

CHANG, TOM, MD
Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

CHEW, WESLEY, OD
Provider Gender: Male
License Number: 14901
NPI: 1952714446
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within

1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

COCKERHAM, KIMBERLY, MD
Provider Gender: Female
License Number: G86885
NPI: 1366493629
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

CONRAD, RANDALL, OD
Provider Gender: Male
License Number: 6423
NPI: 1962617464
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619)

460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

DYER, SHARON, OD
Provider Gender: Female

License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

GOLLOGLY, HEIDRUN, MD
Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

GOLLOGLY, HEIDRUN, MD
Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

GRAY, IGA, MD
Provider Gender: Female
License Number: A174875
NPI: 1033538350
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711

Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

HAN, SULKI, OD
Provider Gender: Female
License Number: 34171
NPI: 1750802195
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-4PM W-TH 9AM-6PM F 9AM-5PM

HIXSON, THOMAS, OD
Provider Gender: Male
License Number: 7490
NPI: 1528072683
Provider English Spoken: Y
Cultural Competency: Y
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HSU, CHRISTOPHER, MD
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

KATZMAN, LEE, MD
Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

LEE, SALLY, DO
Provider Gender: Female
License Number: 20A8088
NPI: 1457468514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SAN DIEGO EYE PROFESSIONALS
8291 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 583-4295
Fax: (619) 393-1133
After Hours Phone: (619) 583-4295
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: German, Spanish, Chinese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TU-F 9AM-5PM SA 9AM-5PM

LEVY, PHILLIP, OD
Provider Gender: Male
License Number: 4884
NPI: 1528189115
Provider English Spoken: Y
Cultural Competency: Y
BUITIQUE OPTOMETRY
5020 BALTIMORE DR STE B
LA MESA, CA 91942
Phone: (619) 464-8303
Fax: (619) 464-4971
After Hours Phone: (619) 464-8303
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-5PM SA 9AM-2PM

MANNEN, JOSEPH, OD

Provider Gender: Male

License Number: 33650

NPI: 1851827034

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619) 460-3711

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

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

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

MARYOUNG, ALLISON, OD

Provider Gender: Female

License Number: 35512

NPI: 1083309124

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

MARYOUNG, ALLISON, OD

Provider Gender: Female

License Number: 35512

NPI: 1083309124

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MERALI, MURTAZA, OD
Provider Gender: Female
License Number: 14558
NPI: 1972944189
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

MORGAN, HUNTER, OD
Provider Gender: Male
License Number: 34799
NPI: 1023547221
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-4PM
W-TH 9AM-6PM
F 9AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

NGUYEN, THY, OD
Provider Gender: Female
License Number: 12746
NPI: 1750490413
Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

OU, JOCELYN, OD
Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

PANDYA, BHUMIKA, OD
Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender

restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

RAJADHYKSHA, SALOMI, OD
Provider Gender: Female
License Number: 34821
NPI: 1134641434
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Yiddish
Cultural Competency: Y
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-4PM W-TH 9AM-6PM F 9AM-5PM

SAMUEL, MICHAEL, MD
Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

TILLMAN, SYLVIA, OD
Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TSUI, NANCY, OD
Provider Gender: Female
License Number: 33944
NPI: 1841785037
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TU, BEVERLY, OD
Provider Gender: Female
License Number: 34108
NPI: 1053892794
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within

1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

TURRILL, MCKENNA, OD
Provider Gender: Female
License Number: 35777
NPI: 1194419960
Provider English Spoken: Y
Cultural Competency: Y
LA MESA VISION CENTER OPTOMETRY
8007 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-4PM
W-TH 9AM-6PM
F 9AM-5PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

YOUNG, ALLA, OD
Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100

LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM

NATIONAL CITY

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM

W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

GOLLOGLY, HEIDRUN, MD
Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KALRA, ANKUR, OD
Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-6PM SA 9AM-5PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KEDDINGTON, JOAN, OD
Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

1/2 mile from Site): 1T
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
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)

472-1010
Accepting New Patients: Yes
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish*

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T
- *Hours: M-TU 8AM-6PM*
  W 8:30AM-5PM
  TH 8AM-6PM
  F 8AM-5PM

KING, MARY, OD
Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY
- 1481 E PLAZA BLVD
  NATIONAL CITY, CA 91950
- *Phone: (619) 477-2159*

Fax: (619) 477-2128
- *After Hours Phone: (619) 477-2159*

Accepting New Patients: Yes
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Arabic, Hindi, Spanish*

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T
- *Hours: M-F 9AM-6PM*
  SA 9AM-5PM

LEE, AUSTIN, OD
Provider Gender: Male
License Number: 14519
NPI: 1922356914
Provider English Spoken: Y
Cultural Competency: Y
VIVE OPTOMETRY
- 1033 HIGHLAND AVE
  NATIONAL CITY, CA 91950
- *Phone: (619) 477-2771*

Fax: (619) 477-1680
- *After Hours Phone: (619) 477-2771*

Accepting New Patients: Yes
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish, Tagalog*

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T
- *Hours: TU 10AM-5PM*
  W-F 9:30AM-5PM

MARLAY, GREG, OD
Provider Gender: Male
License Number: 6998
NPI: 1306903083
Provider English Spoken: Y
Cultural Competency: Y
MARLAY ENTERPRISES
- 1132 E PLAZA BLVD STE 201
  NATIONAL CITY, CA 91950
- *Phone: (619) 477-4166*
- *After Hours Phone: (619) 477-4166*

Accepting New Patients: Yes
- *Site English Spoken: Y*
- *Site Languages(s) Spoken: Spanish*

Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
- *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MENDOZA, RAYMUNDO, OD
Provider Gender: Male
License Number: 8150
NPI: 1306837760
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 475-2184
Fax: (619) 475-3917
After Hours Phone: (619) 475-2184
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TU 10AM-5PM TH-F 10AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within

1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

NGUYEN, THERESA, OD

Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-6PM
SA 9AM-5PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

TAVASSOLI, SARA, OD
Provider Gender: Female
License Number: 13395
NPI: 1184764011
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651

NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

TOUBIA, ELIAS, OD
Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-6PM
SA 9AM-5PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

WU, EVA, OD
Provider Gender: Female

License Number: 14743
NPI: 1073954442
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 477-2771
Fax: (619) 477-1680
After Hours Phone: (619) 477-2771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TU 10AM-5PM
W-F 9:30AM-5PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-4:30PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

OCEANSIDE

KASAI, SARAH, OD
Provider Gender: Female
License Number: 34226
NPI: 1023406238
Provider English Spoken: Y
Cultural Competency: Y
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
Phone: (760) 757-8771
After Hours Phone: (760) 757-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

NGUYEN, BERLINDA, OD
Provider Gender: Female
License Number: 35862
NPI: 1417776238
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
Phone: (760) 757-8771
After Hours Phone: (760) 757-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

NISKANEN, RACHEL, OD
Provider Gender: Female
License Number: 34663
NPI: 1467065797
Provider English Spoken: Y
Cultural Competency: Y
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
Phone: (760) 757-8771
After Hours Phone: (760) 757-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

ROSA, ADAM, OD
Provider Gender: Male
License Number: 34093
NPI: 1295250264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
Phone: (760) 757-8771
After Hours Phone: (760) 757-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

SAN DIEGO

ACKROYD, ARCHIE, OD
Provider Gender: Male
License Number: 4774
NPI: 1629107172
Provider English Spoken: Y
Cultural Competency: Y
VAN HOOSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone: (858) 292-7193
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

ADAMS, MONA, OD
Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410

After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

ARCHIBALD, JOHN, OD
Provider Gender: Male
License Number: 11813
NPI: 1902893357
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM
SA 8:30AM-2PM

BANDAK, DIANA, OD
Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

BANSAL, PREETI, MD
Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

BEAUDRY, AMANDA, OD
Provider Gender: Female
License Number: 33385
NPI: 1477903516
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

BERGMARK, JAMIE, OD
Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

BOECK, CARL, OD

Provider Gender: Male

License Number: 6620

NPI: 1588656151

Provider English Spoken: Y

Provider Language(s) Spoken: German, Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM
SA 9AM-3PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619) 297-2020

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9:30AM-6PM
SA 9AM-3PM

CHAIN, PEI CHI, OD
Provider Gender: Female
License Number: 34439
NPI: 1730676727
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SPOTLIGHT OPTOMETRY
7835 HIGHLANDS VLG PL D 106
SAN DIEGO, CA 92129
Phone: (858) 250-0052
Fax: (858) 788-0287
After Hours Phone: (858) 250-0052
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5PM
W 10AM-6PM
F 9AM-5PM
SA 9AM-1PM

CHEN, LESLIE, OD
Provider Gender: Female
License Number: 12792
NPI: 1508953332
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: Y
EYE STUDIO OPTOMETRY
4475 UNIVERSITY AVE
SAN DIEGO, CA 92105
Phone: (619) 521-2020
Fax: (619) 521-2025
After Hours Phone: (619) 521-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-5PM
TH 9AM-1:30PM
F 9AM-5PM
SA 9AM-1PM

CHONG, TAMMY, OD
Provider Gender: Female
License Number: 35841
NPI: 1700612975
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

CHUNG, ALLEN, OD
Provider Gender: Male
License Number: 33974
NPI: 1003301391
Provider English Spoken: Y
Cultural Competency: Y
SPOTLIGHT OPTOMETRY

7835 HIGHLANDS VLG PL
D 106
SAN DIEGO, CA 92129
Phone: (858) 250-0052
Fax: (858) 788-0287
After Hours Phone: (858) 250-0052
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-5PM
W 10AM-6PM
F 9AM-5PM
SA 9AM-1PM

COLEMAN, BROOKE, OD
Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM
SA 8:30AM-2PM

COOPER, MICHAEL, OD
Provider Gender: Male
License Number: 10476
NPI: 1164586244
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM
SA 8:30AM-2PM

DAVIS, JADE, OD
Provider Gender: Female
License Number: 11765
NPI: 1457303398
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

DUONG, KIM, OD
Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

DUONG, CHERYL, OD
Provider Gender: Female
License Number: 34070
NPI: 1366935678
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM
SA 8:30AM-2PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

GIANG, STEVEN, OD
Provider Gender: Male
License Number: 34489
NPI: 1730710104
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938

After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM SA 9AM-1PM

HO, AMIEE, OD
Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TH-F 9AM-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: (619) 590-1994
After Hours Phone: (619) 590-1994
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: 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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HOANG, KEVIN, OD
Provider Gender: Male
License Number: 34401
NPI: 1790339216
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

HOFFMAN, STEVEN, OD
Provider Gender: Male
License Number: 34561
NPI: 1033736079
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

HOM, GREGORY, OD
Provider Gender: Male
License Number: 9694
NPI: 1154473916
Provider English Spoken: Y
Cultural Competency: Y
GREGORY G HOM OD
11230 SORRENTO VLY RD STE 145
SAN DIEGO, CA 92121
Phone: (858) 535-9835
Fax: (858) 535-1266
After Hours Phone: (858) 535-9835
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TH 9AM-5PM
F 9AM-4PM

HOO, PAMELA, OD
Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

HUANG, GRACE, OD
Provider Gender: Female
License Number: 35485
NPI: 1013605526
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

HUYNH, PAUL, MD
Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER

CTR OF CA INC
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone: (619) 283-1303
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUYNH, CHI, OD
Provider Gender: Female
License Number: 12901
NPI: 1922187426
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
CRYSTAL EYESITE OPTOMETRY
9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126
Phone: (858) 547-3988
Fax: (844) 367-5161
After Hours Phone: (858) 547-3988
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:30AM-6PM
W 9:30AM-6PM
TH-F 10AM-6PM
SA 9AM-3PM

HUYNH, PAUL, MD
Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER CTR OF CA INC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
Phone: (858) 549-3200
Fax: (858) 549-3207
After Hours Phone: (858) 549-3200
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

HUYNH, LOAN, OD
Provider Gender: Female
License Number: 34472
NPI: 1003454604
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
Phone: (858) 674-1276
Fax: (858) 674-5863
After Hours Phone: (858) 674-1276
Accepting New Patients: Yes
Site English Spoken: Y

Site Languages(s) Spoken: Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-4PM
TU 7AM-1PM
W-TH 10AM-6PM
F 10AM-3PM
SA 9AM-2PM

JOMOC, CAITLIN, OD
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

JOMOC, CAITLIN, OD
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834

NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

KHALIGHI, PAYMAN, OD
Provider Gender: Male
License Number: 13014
NPI: 1396897880
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

KHAN, FAHAD, MD
Provider Gender: Male
License Number: A163142
NPI: 1548605843
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: Y
VISION SPECIALISTS OF CALIFORNIA
233 LEWIS ST
SAN DIEGO, CA 92103
Phone: (619) 501-9050

Fax: (619) 501-9054
After Hours Phone: (619) 501-9050
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Bengali, Hindi, Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 8AM-5PM F 8AM-4PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM

KHINDA, SUNEHA, OD
Provider Gender: Female
License Number: 35494
NPI: 1750066726
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8AM-5PM SA 8:30AM-2PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

KLAREN, AMANDA, OD
Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

LAU, KUEN CHINE, OD
Provider Gender: Male
License Number: 11166
NPI: 1821001645
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM SA 9AM-3PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619) 297-2020

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9:30AM-6PM SA 9AM-3PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM SA 9AM-3PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:30AM-6PM
SA 9AM-3PM

LLANES, BENJAMIN, OD
Provider Gender: Male
License Number: 8782
NPI: 1053309005
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Y
SEE KLEER EYECARE CENTER
9580 BLACK MOUNTAIN RD STE J
SAN DIEGO, CA 92126
Phone: (858) 536-8952
Fax: (858) 536-8951
After Hours Phone: (858) 536-8952
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 11AM-6PM
F 1PM-5PM
SA 9AM-1PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD STE F
SAN DIEGO, CA 92124
Phone: (858) 279-6500
Fax: (858) 225-7174
After Hours Phone: (858) 279-6500
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH-F 9AM-5PM
SA 8AM-3PM

MARYOUNG, ALLISON, OD
Provider Gender: Female
License Number: 35512
NPI: 1083309124
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
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
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

MCCLEAN, ESMERALDA, OD
Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

MIZOGUCHI, LIANNE, OD
Provider Gender: Female
License Number: 10104

NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

MOLL, ANGELA, MD
Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

MOOR, TRACY, OD
Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

MOOR, TRACY, OD
Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

NGUYEN, JASMINE, OD
Provider Gender: Female
License Number: 11189
NPI: 1497896922
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

NGUYEN, THANH, OD
Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

NGUYEN, VIET, OD
Provider Gender: Male
License Number: 35481
NPI: 1861170573
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

NGUYEN, 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 restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH-F 9AM-5PM
SA 8AM-3PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

PHAM, TONY, OD
Provider Gender: Male
License Number: 12348
NPI: 1841271434
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Y
MIRA MESA EYECARE
6755 MIRA MESA BLVD STE 141
SAN DIEGO, CA 92121
Phone: (858) 535-8282
Fax: (858) 535-0537
After Hours Phone: (858) 535-8282
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9:30AM-6PM
TH-F 9:30AM-6PM

PHUNG, RICHARD N V, OD
Provider Gender: Male
License Number: 9547
NPI: 1689661571
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese, Chinese
Cultural Competency: Y
SCRIPPS RANCH OPTOMETRI CTR
9880 HIBERT ST STE E1
SAN DIEGO, CA 92131
Phone: (858) 693-9044
Fax: (858) 693-0704
After Hours Phone: (858) 693-9044
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10AM-6PM
TU 10AM-2PM
W-TH 10AM-6PM

F 9AM-2PM
SA 9AM-2PM

POUSTI, SHEIVA, OD
Provider Gender: Female
License Number: 10403
NPI: 1730240052
Provider English Spoken: Y
Cultural Competency: Y
SAN DIEGO EYE CLINIC
OPTOMETRY
3560 FAIRMOUNT AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 431-2020
Fax: (619) 376-2100
After Hours Phone: (619) 431-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: SU-SA 9AM-6PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

SANDOC, EMILY, OD
Provider Gender: Female
License Number: 13535
NPI: 1992969794
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

SANDOC, EMILY, OD
Provider Gender: Female
License Number: 13535
NPI: 1992969794
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
1555 PALM AVE STE A2

SAN DIEGO, CA 92154
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:30AM-6PM
SA 9AM-3PM

SHULKIN, MITCHELL, OD
Provider Gender: Male
License Number: 8153
NPI: 1770531865
Provider English Spoken: Y
Cultural Competency: Y
NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD
STE 1313
SAN DIEGO, CA 92128
Phone: (858) 674-1276
Fax: (858) 674-5863
After Hours Phone: (858) 674-1276
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-4PM
TU 7AM-1PM
W-TH 10AM-6PM
F 10AM-3PM
SA 9AM-2PM

TA, TRANG, OD
Provider Gender: Female
License Number: 12100
NPI: 1518381045
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

TAM, MAY, OD
Provider Gender: Female
License Number: 11960
NPI: 1548255896
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-5:30PM
SA 9AM-3PM

TAM, MAY, OD
Provider Gender: Female
License Number: 11960
NPI: 1548255896
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

TILLMAN, SYLVIA, OD
Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-5PM
SA 9AM-1PM

TO, BRITTANY, OD
Provider Gender: Female
License Number: 10651
NPI: 1306997143

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9:30AM-6PM
SA 9AM-3PM

Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

TONNU, ANH, OD
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

TRAN, ALEXANDER, OD
Provider Gender: Male
License Number: 14136
NPI: 1902414790
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes

Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

TRANG, CHAU, OD
Provider Gender: Female
License Number: 9556
NPI: 1073671087
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish, Vietnamese, Chinese
Cultural Competency: Y
CHAU H TRANG OD
6947 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Phone: (858) 495-0592
Fax: (858) 495-0560
After Hours Phone: (858) 495-0592
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 10AM-3PM
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
CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD STE F
SAN DIEGO, CA 92124
Phone: (858) 279-6500
Fax: (858) 225-7174
After Hours Phone: (858) 279-6500
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9AM-6PM
TH-F 9AM-5PM
SA 8AM-3PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

VAN HOOSE, MARC, OD
Provider Gender: Male
License Number: 12667
NPI: 1932280054
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
VAN HOOSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone: (858) 292-7193
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8AM-5PM TU-TH 9AM-6PM F 8AM-5PM

VO, ANDREW MINH, OD
Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

WONG, GORDON, OD
Provider Gender: Male
License Number: 9832
NPI: 1447338447
Provider English Spoken: Y
Cultural Competency: Y
UPTOWN OPTOMETRY
4096 PARK BLVD
SAN DIEGO, CA 92103
Phone: (619) 291-5505
Fax: (619) 291-4404
After Hours Phone: (619) 291-5505
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

SAN MARCOS

GARFF, KEVIN, MD
Provider Gender: Male
License Number: A160988
NPI: 1609258920
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RSF OPHTHALMOLOGY
100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
Phone: (760) 598-0400
Fax: (760) 249-7394
After Hours Phone: (760) 598-0400
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

GUAN, HOWARD, MD
Provider Gender: Male
License Number: A119766
NPI: 1134427636
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
RSF OPHTHALMOLOGY
100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
Phone: (760) 598-0400
Fax: (760) 249-7394
After Hours Phone: (760) 598-0400
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

PRESTERA, TORY, MD

Provider Gender: Male

License Number: A62321

NPI: 1346224557

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

SKAY, RICHARD, OD

Provider Gender: Male

License Number: 7649

NPI: 1639251945

Provider English Spoken: Y

Cultural Competency: Y

RICHARD M SKAY OD

1903 W SAN MARCOS BLVD STE 130
SAN MARCOS, CA 92078

Phone: (760) 727-2211

Fax: (760) 727-2533

After Hours Phone: (760) 727-2211

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-3PM

TA, MINI, OD

Provider Gender: Female

License Number: 15170

NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760) 736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101

SAN MARCOS, CA 92078
Phone: (760) 736-0020
Fax: (760) 736-0019
After Hours Phone: (760) 736-0020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

TRAN, MICHAEL, OD
Provider Gender: Male
License Number: 14530
NPI: 1649524216
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
Phone: (760) 736-0020
Fax: (760) 736-0019
After Hours Phone: (760) 736-0020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM
SA 9AM-5PM

KEDDINGTON, JOAN, OD
Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
Phone: (619) 466-9444
Fax: (619) 466-9314

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

After Hours Phone: (619) 466-9444
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM SA 9AM-5PM

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): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM SA 9AM-5PM

NGUYEN, THERESA, OD
Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y
Cultural Competency: Y
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone: (619) 466-9444
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM SA 9AM-5PM

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone: (619) 466-9444
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-6PM
SA 9AM-5PM

TOUBIA, ELIAS, OD
Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone: (619) 466-9444
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9AM-6PM
SA 9AM-5PM

VALLEY CENTER

JOYCE, ROBERT, OD
Provider Gender: Male
License Number: 11833
NPI: 1275585127
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082
Phone: (760) 751-8771
Fax: (760) 751-8772
After Hours Phone: (760) 751-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TH 9AM-5PM
F 9AM-1PM

VISTA

DEMLINGER, GLENN, OD
Provider Gender: Male
License Number: 8954
NPI: 1508932518
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
SHADOWRIDGE FAMILY VISION
741 SHADOWRIDGE DR
VISTA, CA 92083
Phone: (760) 727-1844
Fax: (760) 727-3044
After Hours Phone: (760) 727-1844
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9AM-6PM
W 7AM-5PM
TH 9AM-6PM

GEORGE, KENDALL, OD
Provider Gender: Male
License Number: 34270
NPI: 1619529948
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
Phone: (760) 758-2340
Fax: (760) 867-2222
After Hours Phone: (760) 758-2340
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

GEORGE, BRUCE, OD
Provider Gender: Male
License Number: 7696
NPI: 1356414551
Provider English Spoken: Y
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
Phone: (760) 758-2340
Fax: (760) 867-2222
After Hours Phone: (760) 758-2340
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

TRAN, THAO, OD
Provider Gender: Female
License Number: 12867
NPI: 1962581421
Provider English Spoken: Y
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: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 10AM-5PM

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

جدول ECM للمجموعة محل التركيز (POF)

		جدول ECM للمجموعة محل التركيز	البالغون	الأطفال والشباب
	1	لأفراد الذين يعانون التشرد	✓	✓
	2	الأفراد المعرضون لخطر استخدام المستشفى أو قسم الطوارئ (ED) الذي يمكن تجنبه *(يُطلق عليهم رسميًا "المستخدمون المرتفعون")*	✓	✓
	3	لأفراد الذين يعانون اضطرابات عقلية خطيرة و/أو اضطرابات تعاطي المخدرات	✓	✓
	4	لأفراد الذين ينتقلون من السجن	✓	✓
	5	البالغون الذين يعيشون في المجتمع والمعرضون لخطر الرعاية طويلة الأجل (LTC) المؤسسية	✓	
	6	المقيمون في مرافق تمريض البالغين الذين ينتقلون إلى المجتمع	✓	
	7	الأطفال والشباب المسجلون في خدمات الأطفال في California (CCS) أو نموذج CCS للطفل الشامل (WCM) مع احتياجات إضافية تتجاوز حالة CCS		✓
	8	الأطفال والشباب المشاركون في Child Welfare لرعاية الطفل		✓
	9	المجموعة محور التركيز التابعة لـ Birth Equity لعدالة الولادة	✓	✓

CARLSBAD

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

7632 CORTINA CT
CARLSBAD, CA 92009
Phone: (760) 707-9256
After Hours Phone: (760) 707-9256
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (760) 707-9256

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

7632 CORTINA CT
CARLSBAD, CA 92009
Phone: (760) 707-9256
After Hours Phone: (760) 707-9256
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (760) 707-9256

CORONA

TANGELO

1701 N DELILAH ST
CORONA, CA 92879
Phone: (904) 671-2995
After Hours Phone: (904) 671-2995
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Email for New Referrals and Existing Patients: CHRIS.OCONNOR@JOINTANGELO.COM
Phone for New Referrals and Existing Patients: (904) 671-2995

CULVER CITY

MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE STE 465
CULVER CITY, CA 90230
Phone: (323) 203-0070
After Hours Phone: (323) 203-0070
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

Community Supports Services: Housing Deposits,Housing

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@mymedzed.com
Phone for New Referrals and Existing Patients: (323) 203-0070

MEDZED PHYSICIAN SERVICES INC

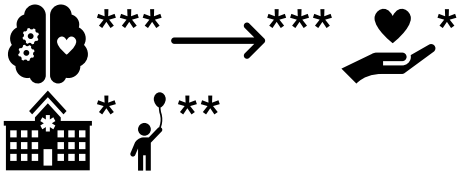
300 CORPORATE POINTE STE 465
CULVER CITY, CA 90230
Phone: (323) 203-0070
After Hours Phone: (323) 203-0070
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@mymedzed.com
Phone for New Referrals and Existing Patients: (323) 203-0070

EL CAJON

INTEGRATED HEALTH PARTNERS

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (833) 867-4642
After Hours Phone: (833) 867-4642
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



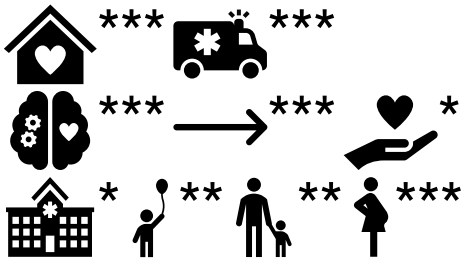
Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (833) 867-4642
Mailing Address: PO BOX 572169;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

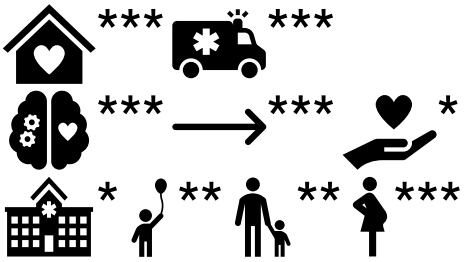
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

EL SEGUNDO

24HR HOMECARE LLC

200 N PACIFIC COAST HWY STE 300
EL SEGUNDO, CA 90245
Phone: (310) 906-3683
After Hours Phone: (310) 906-3683
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Personal Care and Homemaker Services,Respite Services

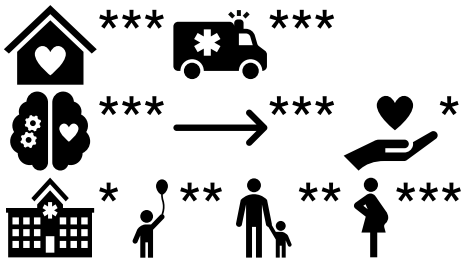
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (310) 906-3683

ENCINITAS

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

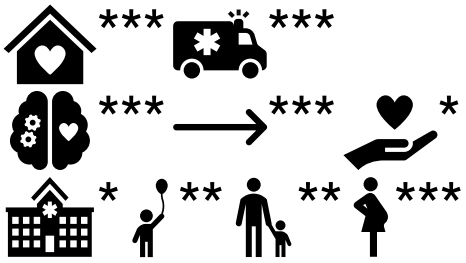
1084 N EL CAMINO REAL STE B149
ENCINITAS, CA 92024
Phone: (619) 273-3295
After Hours Phone: (619) 273-3295
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: referrals@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
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: referrals@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

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

ESCONDIDO

INTERFAITH COMMUNITY SERVICES

550 W WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 489-6380
After Hours Phone: (760) 489-6380
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (760) 489-6380

INTEGRATED HEALTH PARTNERS

215 S HICKORY ST
ESCONDIDO, CA 92025
Phone: (833) 867-4642
After Hours Phone: (833) 867-4642
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (833) 867-4642

TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
Phone: (310) 280-5203
After Hours Phone: (310) 280-5203
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (310) 280-5203

TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
Phone: (310) 280-5203
After Hours Phone: (310) 280-5203
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N

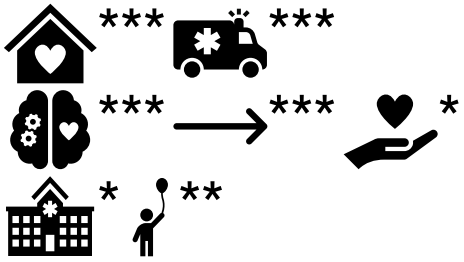
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

Phone for New Referrals and Existing Patients: (310) 280-5203

INTEGRATED HEALTH PARTNERS

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (833) 867-4642
After Hours Phone: (833) 867-4642
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

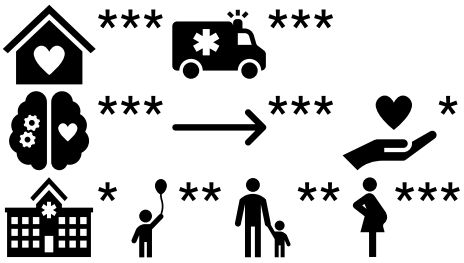


Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (833) 867-4642
Mailing Address: PO BOX 57216 9;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

FALLBROOK

INTEGRATED HEALTH PARTNERS

1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (951) 616-7026
After Hours Phone: (951) 616-7026
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and 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 (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

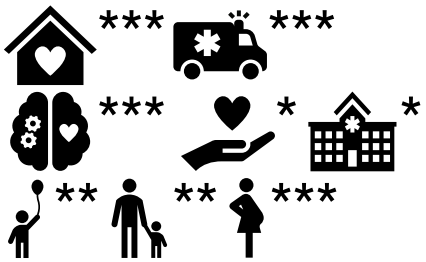
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Accessibility: CONTACT PROVIDER
Website: ibclinic.org
ECM Population of Focus:

*البالغين **الأطفال ***البالغين والأطفال على حد سواء

†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.

طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

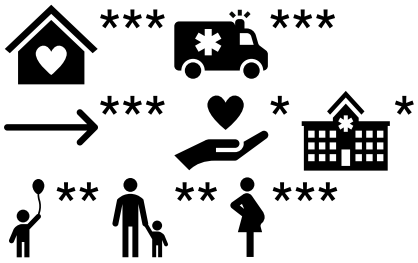


Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org
Phone for New Referrals and Existing Patients: (619) 429-3733

INTEGRATED HEALTH PARTNERS

- 949 PALM AVE
  IMPERIAL BEACH, CA 91932
- *Phone: (619) 429-3733*
- *After Hours Phone: (619) 429-3733*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

ECM Population of Focus:



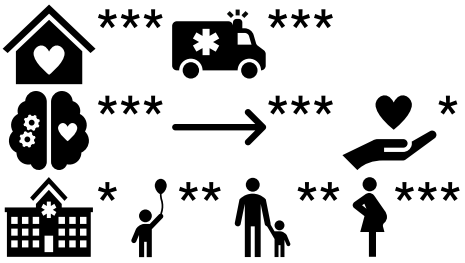
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org
Phone for New Referrals and Existing Patients: (619) 429-3733
Mailing Address: PO BOX 57216 9;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

LEMON GROVE

LA MAESTRA COMMUNITY HEALTH CENTERS

- 7967 BROADWAY
  LEMON GROVE, CA 91945
- *Phone: (619) 510-4641*
- *After Hours Phone: (619) 510-4641*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

ECM Population of Focus:



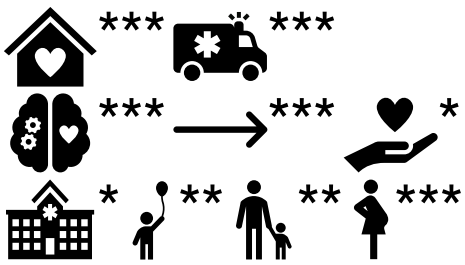
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

SERENE HEALTH

7614 LEMON AVE STE C
LEMON GROVE, CA 91945
Phone: (619) 354-1409
After Hours Phone: (619) 354-1409
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619) 354-1409

SERENE HEALTH

7614 LEMON AVE STE C
LEMON GROVE, CA 91945
Phone: (619) 354-1409
After Hours Phone: (619) 354-1409
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

Email for New Referrals and Existing Patients: andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619) 354-1409

LOS ANGELES

EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
Phone: (323) 276-6471
After Hours Phone: (323) 276-6471
Hours: M-F 7:30AM-4PM
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (323) 276-6471

EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
Phone: (323) 276-6471
After Hours Phone: (323) 276-6471
Hours: M-F 7:30AM-4PM
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (323) 276-6471

EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
Phone: (323) 789-6492
After Hours Phone: (323) 789-6492
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (323) 789-6492

EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
Phone: (323) 789-6492
After Hours Phone: (323) 789-6492
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (323) 789-6492

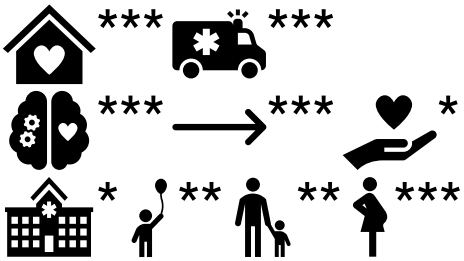
NATIONAL CITY

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

LA MAESTRA COMMUNITY HEALTH CENTERS

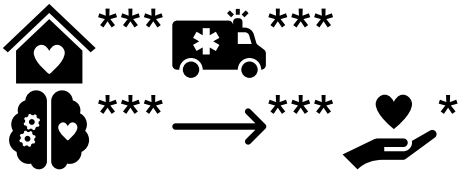
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@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

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
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

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

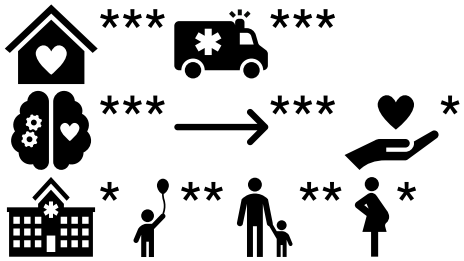
K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

2 BIRCH CT
ORINDA, CA 94563
Phone: (209) 601-0734
After Hours Phone: (209) 601-0734
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Environmental Accessibility Adaptations (Home Modifications)
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (209) 601-0734

PLAYA DEL REY

NURTURING CARE LLC

322 CULVER BLVD STE 1151
PLAYA DEL REY, CA 90293
Phone: (323) 622-4911
After Hours Phone: (323) 622-4911
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ADMIN@NURTURINGCARELLC.COM
Phone for New Referrals and Existing Patients: (323) 622-4911
Mailing Address: 13736 STOCKBROOK RD;Moreno Valley;CA;92553
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

REDONDO BEACH

EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
Phone: (424) 282-2255
After Hours Phone: (424) 282-2255
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (424) 282-2255

EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
Phone: (424) 282-2255
After Hours Phone: (424) 282-2255

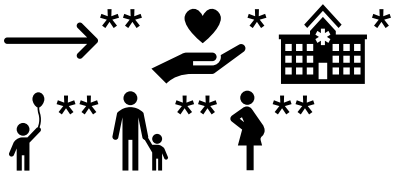
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (424) 282-2255

SACRAMENTO

FULL CIRCLE HEALTH NETWORK

2201 K ST
SACRAMENTO, CA 95816
Phone: (888) 749-8877
After Hours Phone: (888) 749-8877
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

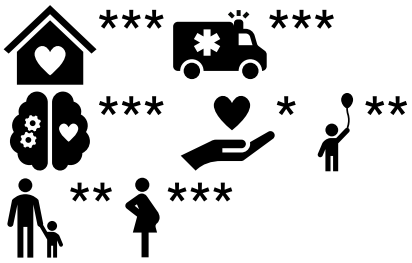


Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: network@fullcirclehn.org
Phone for New Referrals and Existing Patients: (888) 749-8877
Mailing Address: 2201 K ST;Sacramento;CA;95816
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

SAN DIEGO

HEALTHY CONNECT SAN DIEGO

1202 MORENA BLVD
SAN DIEGO, CA 92110
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Hours: M-F 8AM-4PM
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



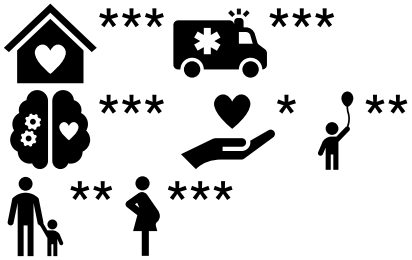
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. 711 :TTY/TDD. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

HEALTHY CONNECT SAN DIEGO

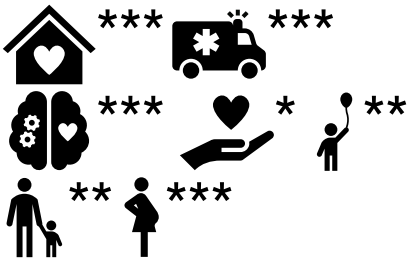
1202 MORENA BLVD
SAN DIEGO, CA 92110
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Hours: M-F 8AM-4PM
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

HEALTHY CONNECT SAN DIEGO

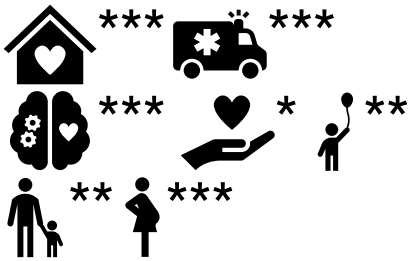
3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108
Phone: (619) 507-9333
After Hours Phone: (619) 507-9333
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@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
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: mhammel@comresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

mresearch.org
Phone for New Referrals and Existing Patients: (619) 507-9333

HORIZON RECUPERATIVE CARE

3423 CHANNEL WAY
SAN DIEGO, CA 92110
Phone: (858) 326-1100
After Hours Phone: (858) 326-1100
Accessibility: CONTACT PROVIDER
Website: www.horizoncenters.org
Community Supports Services: Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (858) 326-1100

IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Accessibility: CONTACT PROVIDER
Website: 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

2-1-1 SAN DIEGO

3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
Phone: (858) 380-5750
After Hours Phone: (858) 380-5750
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

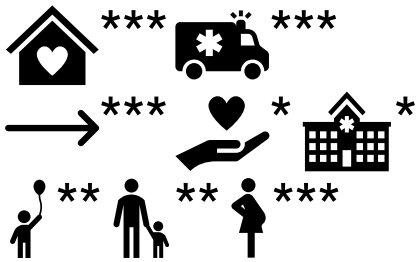
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@211sandiego.org
Phone for New Referrals and Existing Patients: (858) 380-5750

INTEGRATED HEALTH PARTNERS

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org
Phone for New Referrals and Existing Patients: (619) 429-3733
Mailing Address: PO BOX 572169;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

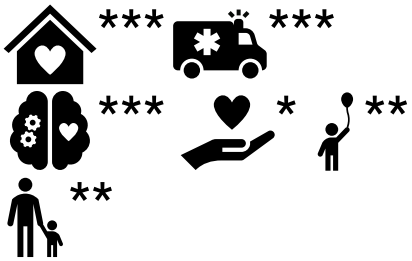
INTEGRATED HEALTH PARTNERS

3710 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (619) 542-4381
After Hours Phone: (619) 542-4381
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and 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
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@syhealth.org
Phone for New Referrals and Existing Patients: (833) 503-5910

INTEGRATED HEALTH PARTNERS

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Accessibility: CONTACT PROVIDER

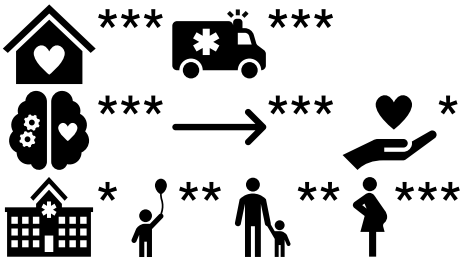
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

LA MAESTRA COMMUNITY HEALTH CENTERS

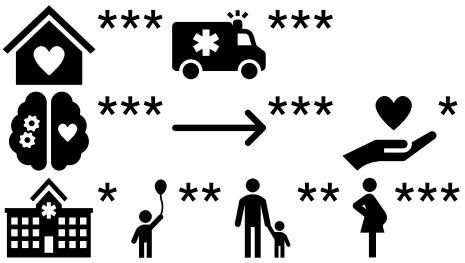
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Asthma Remediation,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Asthma Remediation,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N

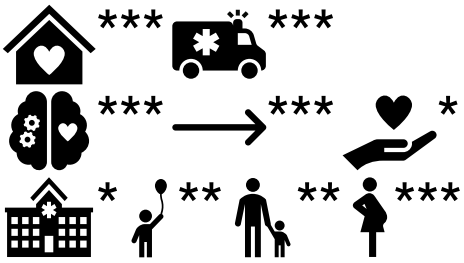
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:

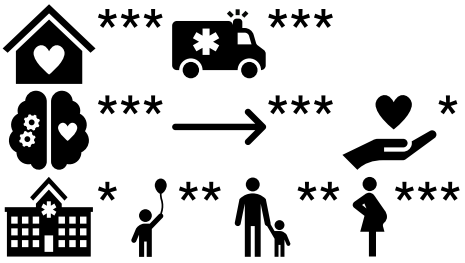


Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:



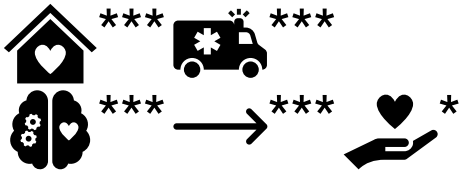
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619)

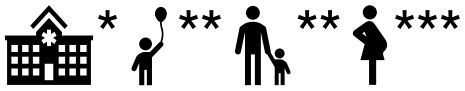
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

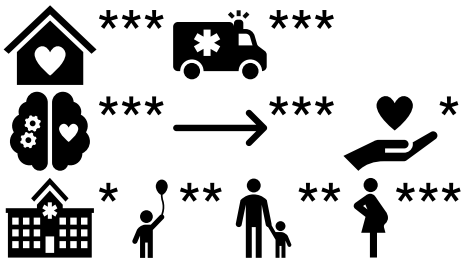




Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMO UNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional 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
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



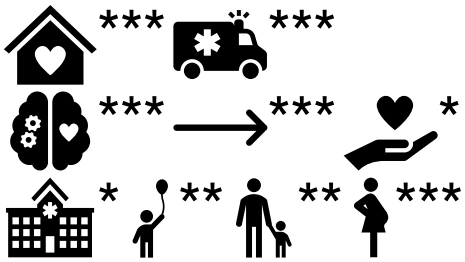
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMO UNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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

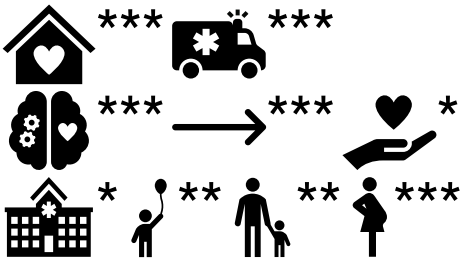
4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



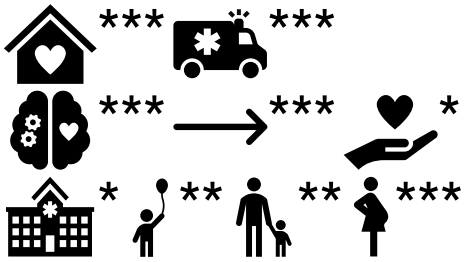
Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

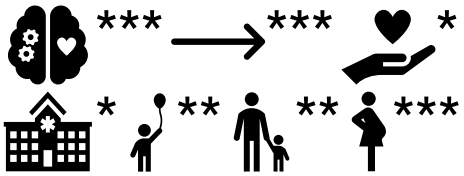
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

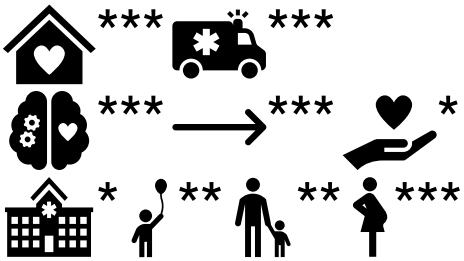
LA MAESTRA COMMUNITY HEALTH

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

CENTERS

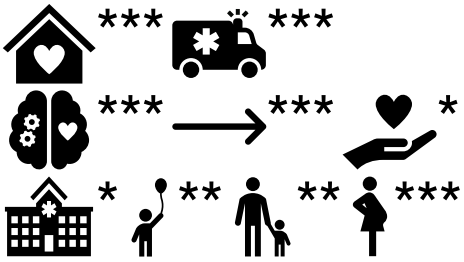
4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG
Phone for New Referrals and Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;San Diego;CA;92105
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
Accessibility: CONTACT

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

PROVIDER
Website: N/A
Community Supports Services: Day Habilitation Programs,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 810-8668

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Day Habilitation Programs,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 810-8668

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Accessibility: CONTACT PROVIDER
Website: www.sdfamilycare.org
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (858) 279-0925

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Accessibility: CONTACT PROVIDER
Website: www.sdfamilycare.org
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (858) 810-8700

LIGHTBRIDGE HOSPICE

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

LLC

6155 CORNERSTONE CT E STE 220
SAN DIEGO, CA 92121
Phone: (858) 500-7547
After Hours Phone: (858) 500-7547
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: amandas@lightbridgemedical.com
Phone for New Referrals and Existing Patients: (858) 500-7547

MAMAS KITCHEN

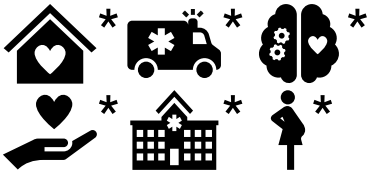
3960 HOME AVE
SAN DIEGO, CA 92105
Phone: (619) 233-6262
After Hours Phone: (619) 233-6262
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 233-6262

MCALISTER INSTITUTE

2506 MARKET ST
SAN DIEGO, CA 92102
Phone: (916) 442-0277
After Hours Phone: (916) 442-0277
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Sobering Centers
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (916) 442-0277

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858) 637-3221
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Email for New Referrals and Existing Patients: calaim@jfssd.org

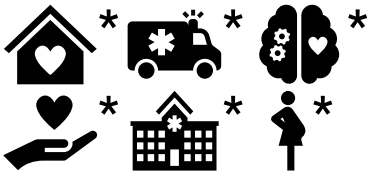
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

Phone for New Referrals and Existing Patients: (858) 637-3221

JEWISH FAMILY SERVICE OF SAN DIEGO

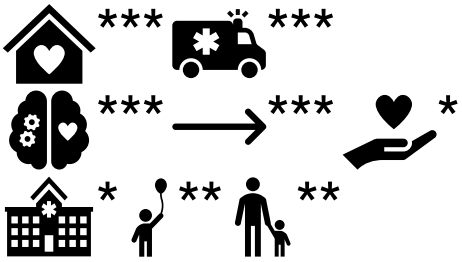
8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858) 637-3221
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals
Street Medicine Provider: N
Email for New Referrals and Existing Patients: calaim@jfssd.org
Phone for New Referrals and Existing Patients: (858) 637-3221

SERENE HEALTH

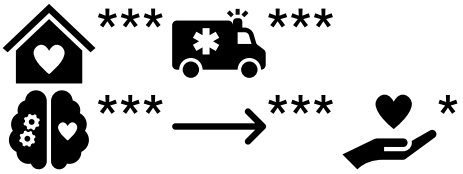
3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
Phone: (619) 354-1409
After Hours Phone: (619) 354-1409
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619) 354-1409
Mailing Address: 4849 RONSON CT STE 207;San Diego;CA;92111
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

SERENE HEALTH

3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
Phone: (619) 354-1409
After Hours Phone: (619) 354-1409
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



*البالغين **الأطفال ***البالغين والأطفال على حد سواء

†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.

طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

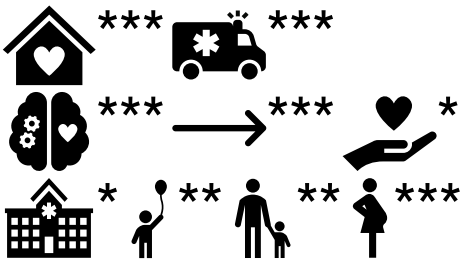
K. مقدمو الخدمات الأخرى (الدعم المجتمعي، وإدارة الرعاية المحسنة)

Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: andrea@serenehealth.com
Phone for New Referrals and Existing Patients: (619) 354-1409
Mailing Address: 4849 RONSON CT STE 207;San Diego;CA;92111
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION

3530 CAMINO DEL RIO N
STE 300
SAN DIEGO, CA 92108

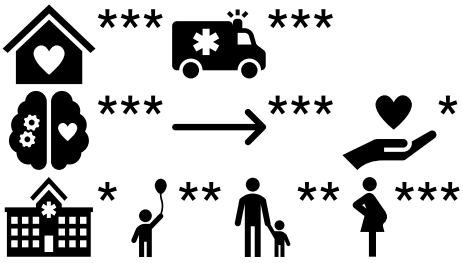
Phone: (619) 398-4585
After Hours Phone: (619) 398-4585
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@voasw.org
Phone for New Referrals and Existing Patients: (619) 398-4585
Mailing Address: 3530 CAMINO DEL RIO N STE 300;San Diego;CA;92108
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
Phone: (619) 876-4450
After Hours Phone: (619) 876-4450
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition

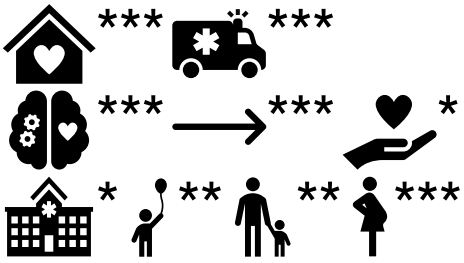
*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org
Phone for New Referrals and Existing Patients: (619) 876-4450
Mailing Address: 823 GATEWAY CENTER WAY;San Diego;CA; 92102
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

FAMILY HEALTH CENTERS OF SAN DIEGO

- 823 GATEWAY CENTER WAY
  SAN DIEGO, CA 92102
- *Phone: (619) 876-4450*
- *After Hours Phone: (619) 876-4450*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

ECM Population of Focus:



Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org
Phone for New Referrals and Existing Patients: (619) 876-4450
Mailing Address: 823 GATEWAY CENTER WAY;San Diego;CA; 92102
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

FATHER JOES VILLAGES

- 16 15TH ST
  SAN DIEGO, CA 92101
- *Phone: (619) 645-6405*
- *After Hours Phone: (619) 645-6405*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

Community Supports Services: Recuperative Care (Medical Respite)
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (619) 645-6405

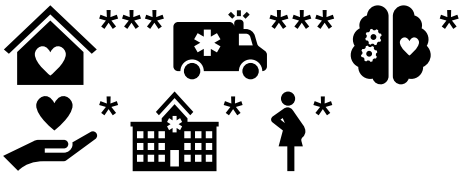
SAN FERNANDO

PARTNERS IN CARE FOUNDATION

- 732 MOTT ST STE 150

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

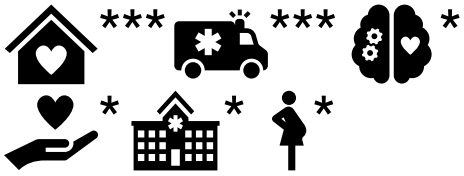
SAN FERNANDO, CA 91340
Phone: (747) 500-4609
After Hours Phone: (747) 500-4609
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Personal Care and Homemaker Services,Respite Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@picf.org
Phone for New Referrals and Existing Patients: (747) 500-4609

PARTNERS IN CARE FOUNDATION

732 MOTT ST STE 150
SAN FERNANDO, CA 91340
Phone: (747) 500-4609
After Hours Phone: (747) 500-4609
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

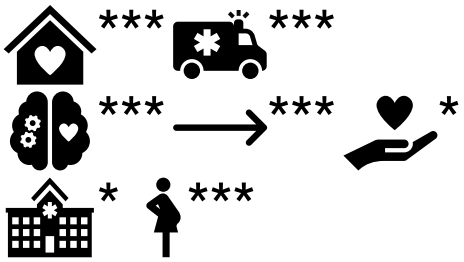


Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Personal Care and Homemaker Services,Respite Services
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecm@picf.org
Phone for New Referrals and Existing Patients: (747) 500-4609

SAN MARCOS

INTEGRATED HEALTH PARTNERS

150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 566-1922
After Hours Phone: (760) 566-1922
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: eva.diaz-leon@truecare.org
Phone for New Referrals and Existing Patients: (760)

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

566-1922
Mailing Address: PO BOX 57216 9;Tarzana;CA;91357
JI ECM Provider Billing- FFS (PAVE Enrollment)
JI ECM Provider Services-Warm Handoffs Only

VAN NUYS

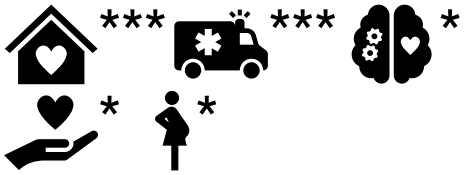
LIBERTANA HOME HEALTH OF SHERMAN OAKS

5805 SEPULVEDA BLVD
STE 605
VAN NUYS, CA 91411
Phone: (818) 902-5000
After Hours Phone: (818) 902-5000
Accessibility: CONTACT PROVIDER
Website: N/A
Community Supports Services: Community Transition Services/Nursing Facilities Transition to a Home,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Nursing Facility Transition/Diversion to Assisted Living Facilities,Personal Care and Homemaker Services,Respite Services
Street Medicine Provider: N
Phone for New Referrals and Existing Patients: (818) 902-5000

VISTA

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services: N/A
Street Medicine Provider: N
Email for New Referrals and Existing Patients: ecmteam@vcc.org
Phone for New Referrals and Existing Patients: (760) 631-5000

*البالغين **الأطفال ***البالغين والأطفال على حد سواء
†تتطلب إدارة الرعاية المحسّنة (ECM) والدعم المجتمعي التصريح المسبق ويقتصر على الأعضاء الذين يستوفون معايير تأهل محددة.
طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون من التشرد دون مأوى. اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

AFC URGENT CARE OF SAN DIEGO

License Number:

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

L. مراكز الرعاية العاجلة

(619) 790-7800
SU-SA 8AM-8PM
Accessibility: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

AFC URGENT CARE OF SAN DIEGO

License Number:
NPI: 1558788620
1740 ROSECRANS ST
SAN DIEGO, CA 92106
(619) 790-7800
(619) 790-7800
SU-SA 8AM-8PM
Accessibility: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

AFC URGENT CARE OF SAN DIEGO

License Number:
NPI: 1558788620
8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126
(858) 900-3550
(858) 900-3550
SU-SA 8AM-8PM
Accessibility: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

AFC URGENT CARE OF SAN DIEGO

License Number:
NPI: 1952995466
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880
(858) 800-2880
SU-SA 8AM-8PM
Accessibility: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

AFC URGENT CARE OF SAN DIEGO

License Number:
NPI: 1558788620
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880
(858) 800-2880
SU-SA 8AM-8PM
Accessibility: CONTACT PROVIDER

https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

AFC URGENT CARE OF SAN DIEGO
License Number:
NPI: 1558788620
8590 RIO SAN DIEGO DR STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600
SU-SA 8AM-8PM
Accessibility: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

CHULA VISTA

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of

<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT

PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT
PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of

<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of <TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of <TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of <TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of <TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

اتصل بخدمة العملاء لدى Blue Shield Promise على 1-855-699-5557 للحصول على المعلومات السارية، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً. TTY/TDD: 711. زر الموقع الإلكتروني blueshieldca.com/promise/medi-cal. المعلومات الموجودة في دليل مقدمي الخدمات هذا قابلة للتغيير.

N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT

PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT

PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT

PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of

<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

SAN DIEGO

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT

PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of

<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER

N/A

Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of <TERM DATE>

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: CONTACT

PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

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: CONTACT PROVIDER
N/A
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

SOUTHBAY URGENT CARE INC
License Number:
NPI: 1558746750
1628 PALM AVE
SAN DIEGO, CA 92154
(619) 591-9999
(619) 591-9999
Spanish, Vietnamese
SU 10AM-6PM
M-F 9AM-8PM
SA 10AM-6PM
Accessibility: CONTACT PROVIDER
https://www.southbayurgentcare.com/
Accepting New Patients: No
Contract Terminated as of
<TERM DATE>

M.فهرس الرعاية الأولية

2

2-1-1 SAN DIEGO.....1929
24HR HOMECARE LLC.....1919

A

ABDALLAH, ALI. 425, 426
ABDULRAHIM, AHMED. 59, 60, 83
ABELHAD, NADIA. 1670
ABELL, GEOFFREY..... 568
ABERCROMBIE, SHERI.1551, 1735, 1736
ABRAMSON, RACHEL. 568, 569
ABSI, CHRISTIAN..... 883
ABU-DOULEH, NADIA. 1241
ACEVEDO, SUSANA.....721
ACKROYD, ARCHIE. 1881
ACOSTA, ANGELICA. 822
ADAMI, REBECCA. 1118, 1387
ADAMS, LAURA. 1096, 1617
ADAMS, MONA.....1807, 1814, 1881
ADAMS, STEPHEN. 1070, 1567
ADJAN, ROULA. 189, 569
ADLER, ERIC. 902, 1378
ADLOUNI, LOUBABA.....570
AFC URGENT CARE OF SAN DIEGO. 1944, 1945, 1946
AFSHAR, KAMYAR. 1370
AGHILI, ROXANA. ...792, 878, 1190, 1481
AGING & INDEPENDENCE SERVICES.....1704
AGNIHOTRI, PARAG. 1378
AGUERO, AMETHYST..... 223
AGUERO, PETER. 1605, 1606
AGUILA, YESENIA. 1241
AGUILAR, EDITA. 225, 226
AHMAD, AAKIF..... 420
AISAGBONHI, OMONIGHO.1044, 1045, 1468
AKONG, KATHRYN. 1515
AKRAMI, KEVAN. 828
AKUTHOTA, PRAVEEN..... 1370
AL ANI, NAJWAN. 153
AL AZZAWI, SARAH. 903, 1210
AL KHIAMI, BELAL. 994, 1130, 1379
AL-BANAA, KADHIM. 972, 1348
AL-MSHHDANI, AYSER..... 532
ALAGIRI, MADHU. 1520
ALANI, ANAS. 1230
ALANIZ, MATEO. 86
ALASSIL, SALLY. 495, 496
ALAYARI, AMETHYST. 1142, 1482
ALBINO, NICHOLAS. 570, 571
ALBO, MICHAEL.....1646
ALBRIGHT, KELSEY. 1051, 1532
ALDANA, NANCY. 226
ALDERSON, CHEVON. 1330
ALDOUS, JEANNETTE.497, 706, 1354, 1664
ALEXANDER, BRENTON. 904, 1210
ALFONSO, ALVIN. 935, 1287
ALGHAMDI, ASMA. 153, 154, 271
ALGHURAIBI, OHOUD..... 886
ALGRA, JEFFREY..... 1151, 1530
ALKATIB, RHONDA. 1472
ALLEN, ELIZABETH.....1045, 1468
ALLEN, KATHERINE. 252, 894, 1242
ALLEN, RACHAEL. 1020, 1439
ALLERS, JENNA. 1051
ALOTAIBI, MONA. 990
ALSHAWABKEH, LAITH. 915, 1230
ALSTEEN, STEPHANIE. 1242
ALVA, WENDY.....814
ALVARADO, EDMUND. 601
ALVAREZ-ESTRADA, MIGUEL.426, 689, 690
ALWAHAB, AREEJ. 189
ALWASH, MUSTAFA. 167
ALYAS, ALISIA.....196
AMANAT, SOROOSH. 87
AMANN, CHRISTOPHER.829, 943, 1306
AMAYA, RICARDO.....135, 136
AMBER HOME. 1697
AMBO, STANLEY. 757
AMBROSE, CHRISTOPHER. 771, 1685
AMERICARE ADULT DAY HEALTH CARE CENTER. 1703
AMIRNOVIN, RAMBOD..... 1482
AMOS, MARIA. 1242
AMREEN HOME..... 1697
ANAND, GOBIND. 966, 1339, 1340
ANDAYA, MIKHAEL. 272
ANDER, AZIZ. 1657
ANDERSON, ELAINE.779, 817, 863, 1117, 1347
ANDERSON, MANDY..... 713
ANDREE, GREGOR.....571, 572, 1520
ANDREWS, BRAD. 1179
ANDRU HOME. 1696
ANG, LAWRENCE. 994, 1379
ANZA HOUSE. 1697
AOTO, KIM.1783, 1798, 1807, 1842, 1865, 1882
APPELBAUM, BRUCE. 1736
APPENZELLER, ERICA. 1238
APPLEGET, JOSEPH. 1287
APRIL, MONIQUE..... 232, 233
AQUINO, FELINO.... 263, 264, 355, 356
ARAFAH, DEEMA. 1502
ARAIZA, ERNESTINA. 823, 1709
ARCE GOMEZ, LAURA.....87, 88
ARCEO, JACQUELINE. 1736
ARCHAMBAULT, CHRISTIAN. 572
ARCHIBALD, JOHN. 1826, 1882
ARELLANO, JACQUELINE.832, 919, 920, 1238, 1239
ARENAS, CECILY. 1243
ARGOUD, GEORGES. 497, 498
ARHART, KESLEY. 767, 774, 1227
ARLATA, TAMANTHA. 736
ARLINGHAUS, RENE. 1712
ARMANI, AVA. 856, 1097, 1618, 1685
ARMEEN, GARY. 1051, 1532
ARMENTA, JORGE. 197, 294, 601
ARMSTON, LINDSEY. 775, 814
ARRIETA, IRIS.....1682
ARRIETA, NOEMI. 208, 690, 1662
ARTS, SERENA. 356
ARUTYUNOV, BORIS..... 1356
ARVIZU, MARGARITA..... 356, 357
ASHAK, DANI. 842, 1011, 1423, 1424
ASIMAKOPOULOS, FOTIOS. 972
ASIS, STEPHANIE..... 1798, 1814, 1843
ASLIAN, AZITA. 289
ASSADIAN, MEHRAK. 409
ATIENZA, PAMELA. 120

ATIGA, SCHUBERT. 787, 788, 1665
ATMAR, AKMAL. 1166
AUSTIN, ANDREA. 944, 1306
AUSTIN-PAGE, LUKAS. 1482
AVALLONE, THOMAS. 1843
AVILA, MICHAEL. 209
AVILES, LEAH. 136
AWDISHO, ALAN. 167
AWDYKOVYCH, MARTA. 572, 573
AWWAD, REEM. 1070, 1568
AYON MARTINEZ, CARLOS. 750
AYSON, NICOLE. 573
AZIMI, AYSUN. 574

B

BACANI, AMY. 1719
BACHARACH, REBECCA. 427, 738
BAEK, KILHYO. 296, 297
BAEZ, BEATRICE. 272
BAGHOUMIAN, MARINEH. 1843
BAGRODIA, ADITYA. 1114, 1646
BAHRAMZI, MARIA. 427, 428
BAI-TONG, SHIYU. 840, 1001, 1396
BAILEY, JACOB. 1067, 1562
BAILONY, AHMAD. 289
BAILONY, MOHAMMED. 290
BAIN, NATALIE. 154, 429
BAIOU, MOHAMED. 734
BAISLEY, SHAWN. 64, 230
BAKER, TANYA. 1243
BALDONADO, ANALICIA. 131, 132
BALDWIN, ANDREA. 1172
BALDWIN, DONNA. 351
BALIKIAN, PHILIP. 1206, 1207
BALL, SHELDON. 498, 499, 1357
BALL, STEPHEN. 1089, 1606
BALLAS, JERASIMOS. 838, 998
BALLOUT, REEM. 859
BALTRUS, JUSTINE ANN. 1777
BALUCH, NARGES. 1208
BANDAK, DIANA. 1783, 1799, 1808, 1814, 1830, 1843, 1844, 1865, 1866, 1882
BANGS, SASHA. 294, 295
BANKS, SARAH. 1552, 1737
BANSAL, PREETI. 845, 870, 1134, 1185, 1439, 1808, 1814, 1883
BAQIR, HUMA. 1737, 1738
BARBA, DAVID. 831, 1101, 1626
BARBADILLO, FERDINAND. 121, 721, 722
BARMAN, PRANAB. 977, 1351
BARNARD, LUKE. 1120, 1163, 1164, 1799, 1844, 1866
BARNES, LAURA. 990, 1371
BARNES, RYAN. 1618, 1619
BARRIOLA RUBARTH, RODRIGO. 980, 1357
BARRY, JEFFREY. 944, 1306, 1307
BARSOTTI, ALEXANDRA. 936, 1287
BARTZ, BRYAN. 1606
BASS, GURGIANA. 1552, 1553, 1738
BAUM, PETER. 66, 67, 766
BAUMAN, LAURA. 1340
BAUTISTA, LUIS. 60, 61
BAXTER, SALLY. 1020, 1440
BAYAT, HAMED. 864, 1202
BAYLON, ALDO. 799, 1705
BEAUCHAMP-WALTERS, JULIA. 1521
BEAUDRY, AMANDA. 1815, 1883
BEAUMONT, THOMAS. 1101
BECERRA SONGOLO, TOSHA. 904, 1210
BECERRA, MAURA. 778
BECHIS, SETH. 1647
BECKMAN, KARI. 1712
BEGOVIC, ADNAN. 829, 1129, 1371, 1372
BELANGER, TANYA. 645, 646, 647, 1655
BELEN, NEZER. 138, 357
BELL, JENNIFER. 1731, 1732, 1780, 1781
BELL, TRACY. 1330, 1331
BELLINGHAUSEN, AMY. 944, 1307, 1308
BEN-HAIM, SHARONA. 772, 1101, 1197, 1626
BENARD, ROBERT. 1243
BENCH, SHAWN. 1619
BENDER STERN, JULIA. 882
BENITEZ, MARTHA. 499, 500
BERGEN, SOPHEA. 1532
BERGERON, PATRICK. 1090, 1607
BERGGREN, ERICA. 714
BERGMARK, JAMIE. 1815, 1883
BERMAN, ZACHARY. 1070, 1568, 1569
BERNADETT, ALEX. 1331
BERNETICH, MEGHAN. 1672
BERUMEN, JENNIFER. 1620
BHATIA, KARISHMA. 904, 1211
BHATIA, SHAGUN. 845, 870, 1135, 1185, 1440, 1808, 1815, 1883
BHATTACHARJEE, RAKESH. 1515
BIALOSTOZKY, MARIO. 1483
BICKLER, STEPHEN. 1636
BIFFL, SUSAN. 1151, 1530
BIGELOW, ELSIE. 904, 1211
BIGELOW, SPENCER. 904, 1211, 1212
BILOTTA, NATALIE. 1243
BIMSTEIN, JAIME. 775
BINDER, NICHOLAS. 1783, 1799, 1816, 1844, 1845, 1866, 1884
BINETTE, DONYA. 298, 1172
BIRGERSDOTTER GREEN, ULRIKA. 1228
BIRS, ANTOINETTE. 915
BISHOP, MELISSA. 429
BISSET, LOGAN. 1071, 1569
BIVER, LAURA. 1424
BJORNSON, MICHELE. 752, 753
BLACK, NICHOLAS. 945
BLACKWELL, CHRISTOPHER. 1071, 1569, 1570
BLAKE, GARY. 532, 533, 1425
BLASKIEWICZ, DONALD. 772, 1102
BLISS, MORGAN. 847, 874, 1137, 1188, 1453
BLOCKER, NIRIT. 628
BO, CHRISTOPHER. 770
BOCK, MATTHEW. 1475
BOCKHORN, LAUREN. 1105, 1629
BODIFORD, SAMANTHA. 430
BOECK, CARL. 1884
BOEHMER, ALEXANDRA. 1090, 1607
BOEING, KRISTINA. 1288
BOND, KIMBERLEE. 1437, 1438
BONE, SAMUEL. 1071, 1570
BONSU, BEMA. 290

M.فهرس الرعاية الأولية

BOOTH, CHRISTOPHER. 1063, 1720
BORDIN-WOSK, TALYA..... 981, 1357
BORJON, AGUSTIN..... 890
BOROK, ZEA..... 991, 1372, 1373
BORQUEZ, ALEJANDRO. 1139, 1475
BORSAN, COSMIN..... 690, 691
BORTZ, PASCAL..... 814, 1098
BOSTON, LAURA..... 82, 408
BOUTELLE, AMY..... 921
BOYD, LISA. 1051, 1533
BOYS, JOSHUA..... 1111
BRADY HOME..... 1696
BRADY, KATELYN. 921
BRADY, PATRICIA..... 430, 431
BRANCH, CODY. 1072, 1571
BRANCH, LAUREL. 966, 1340
BRAZIER, SETH..... 797, 1204
BREEDLOVE, AMANDA..... 1739
BRIED, JAMES..... 1207
BRIGGS, BENJAMIN. 1507
BRION, SONJA. 204
BRIONES, NAOMI. 1301
BRIONES-COLMAN, FELICIA..... 500
BRODSKY, MARK. 431
BROOME, HELEN. 1045, 1469
BROUDY, ABRAHAM..... 121
BROWN, BRANDON. 154, 155, 431, 432
BROWN, DARCIE. 1739
BROWN, REGINA.....1179, 1655
BROWN, TERESA. 1072, 1571
BROWN, VICTORIA. 1244
BRUBAKER, ALEAH. 1620
BRUECKNER, TAMMIE..... 1052, 1533
BRUHN, JOSHUA..... 155
BRYL, AMY. 1483
BUCKNER, JOSEPH..... 728
BUECHNER, CHARLENE.111, 178, 179, 256, 257, 534, 535, 536, 537, 742
BUENROSTRO, CHRISTINA.. 922, 1244
BUI, AN..... 905, 1212
BUI, ANH. 1245
BUI, CHRISTOPHER. 1629
BUI, JACK..... 1046, 1469, 1470
BUI, JONATHAN. 841, 1407
BUI, QUAN. 995, 1380
BUI, TINA..... 1845
BUKATA, SUSAN. 1105, 1630
BULOW, KWI..... 1664
BUNOSKY, ABIGAIL. 1091, 1607
BURGAMY, ELIZABETH. 74
BURNS, DELLA..... 357, 358
BURROWS, TERENCE. 936, 1288
BURROWS, WILLIAM..... 419
BURTON, LUCAS..... 432, 433
BUTLER, KELLEY..... 1662
BUTLER, KIM..... 1800

C

CABALLERO, JAMES..... 410, 411
CABALLERO, NOE.....1739, 1740
CABANISS, SCOTT..... 905, 1212, 1213
CABARLO, JEHRIB. 574
CABRAL, ALEJANDRA..... 1652
CABREJOS, CLAUDIO..... 1775
CACHAY, EDWARD. 1358
CAGE, DORI..... 1625
CAINE, SAMUEL.....797, 798, 1123, 1166
CALAME, ANTOANELLA. 1301
CALDERON, JORGE. 705
CALHOUN, CHANELLE. 337, 338
CALIFANO, JOSEPH. 1028, 1453
CALLAGHAN, KATHRYN. 1740
CALLAWAY, MALLORY. 1604
CAMERON, IAN. 628, 629
CAMERON, MELISSA. 1521
CAMP, ANDREW. 1441
CAMPA, PATRICIA..... 824
CAMPBELL, BRIANNA. 273, 433
CAMPBELL, PATRICK. 883
CAMPBELL, SARA. 1483
CAMPOS, MELISSA..... 88, 691
CAMPOS, PRISCILLA. 67, 766, 896
CANLAS, AVELINO. 273, 274
CANO, SARAH. 1213
CANTU, ALICIA.....1521
CANTU-REYNA, GUILLERMO.288, 528, 529
CAO, STEPHANIE. 1884
CAPETANAKIS, ELENI. 121
CAPOZZI, JENNIFER..... 922, 1245
CARAWAY, ARLENE. 762
CARAZO, MATTHEW. 915, 1230
CARDINELL, ANNA..... 833, 1672
CARDONES, ARTHUR..... 739
CARETHERS, JOHN. 966, 967, 1341
CARLO HOUSE. 1697
CARLSON, BLAKE..... 1072, 1572
CARMONA, RUBEN. 800, 1124, 1565
CARNEY, AMY. 206
CARR, MIANDA..... 714, 715
CARRAGEE, CATHERINE. 1331
CARRERA, JORGE..... 223, 224
CARRIEDO-CENICEROS, MARIA.274, 434, 692
CARRILLO, MARITZA..... 85, 778
CARRION-GELABERT, ANA. ... 775, 814
CARROLL, JEANNE. 1397
CARROLL, JOSEPH. 636, 637
CARROLL, MAYA. 1172
CARSON, LATISA. 715
CARSWELL, AIMEE. 1073, 1572, 1573
CARTER, KHALIL.111, 112, 179, 257, 537, 538, 539, 540, 541, 742
CARTER, LEXXUS. 762
CARTER, NATASHA. 419, 420
CARVALHO, DANIELA. 1137, 1454
CASA PACIFICA ADHCC..... 1702
CASAS, TAMARA. 945, 1128, 1308, 1309
CASILLAS BERUMEN, SERGIO.813, 889, 1621
CASTANER, ZALYA... 209, 210, 750, 751
CASTELLANOS, JOEL. 914, 1225
CASTELLANOS, LUIS..... 1231
CASTELNOVI, CLAUDIA. 575
CASTILLEJOS, DAVID..... 1790
CASTILLEJOS, MARIA. 1791
CASTILLO, PATRICIA. 602, 1533
CASTILLO, STEPHANIE. 692
CASTILLO, TRINIDAD..... 1713
CASTLEBERRY, DANI..... 1705, 1706
CATES, DANIEL. 1454
CAZARES, DARIANA. 1740
CELAYA, PATRICIA.....799, 1706
CELESTIN-RAMSEY, AKANKE. 358
CENTENO QUIEL, JULISSA. 762

M.مؤشر مقدمي الرعاية الصحية الأولية

CERNELC-KOHAN, MATEJKA.852, 1516
CEVALLOS, JAMES.....274, 275
CHA, DANIEL.....1789
CHAIN, PEI CHI.....789, 1885
CHAIT LLAMAS, LWBBA.....722
CHAKRABARTI, PRIYA.112, 180, 258, 541, 542, 543, 743
CHALISON, DANIEL.....936, 1288
CHALMERS, VIRGINIA.....1732
CHAMBERS, KATRINA.....833
CHAMPAGNE, ALLISON.....1300
CHAN, ANDY.....500, 501
CHAN, CHI-BEW.....905, 1213, 1214
CHAN, KWOK FUNG.....1791, 1800
CHANDRADAS, SAJIV.....501
CHANG, AMY.....421
CHANG, EDWARD.....769, 792, 1455
CHANG, JEREMY.....972
CHANG, JOHANNA.....853, 1519
CHANG, TOM.....1808, 1816, 1845
CHANTALA, ELIZABETH.....1246
CHASE AVENUE FAMILY HEALTH CTRS INC.....31
CHASE AVENUE FAMILY HEALTH CTRS INC,.....163
CHASE, AVA.....358, 359
CHAU, PETER.....1475
CHAU, VIVIAN.....1816
CHAUSSE CASTRO, EKATERINA...683
CHAVEZ SANTOS, MARIA.....768
CHAVEZ, ALEXANDRIA.....1246
CHAVEZ, LUIS.....778, 817, 1341
CHEATHAM, BRITTANY.....1246
CHEHABI, HAZEM.1010, 1011, 1422, 1423
CHEN, ALICE.946, 964, 965, 1309, 1332
CHEN, ANDREW.....863, 1201
CHEN, CHUNG-JIAH.....1349
CHEN, EILEEN.....575
CHEN, JAMES.....502
CHEN, JENNIFER.....575, 576
CHEN, LESLIE.....1885
CHEN, MARGARET.....224
CHEN, TONY.....1647
CHEN, TSUH-YIN.....110
CHEN, YU-WEI.....973, 1348
CHENG, BRANDON.801, 802, 897, 1168
CHENG, GEORGE.....981, 1358
CHENG, ISABEL.....883
CHENG, KAREN.....1073, 1573, 1574
CHENG, SARAH.....1020, 1021, 1441
CHENG, YU-TSUN.....1155, 1630
CHERRY, REENA.....1052
CHERY, FARAH.....89
CHESHER, NICHOLAS.1064, 1553, 1720, 1740
CHEW, WESLEY.....1846
CHEWNING, RUSH.....1574
CHIARAPPA, FRANK.....1105, 1630
CHIEN, PEI.....1091
CHILAKA, SAMUEL.....299, 300
CHILDERS, DIANA.....978, 979, 1353
CHIN, BRIAN.....946, 1309
CHISHOLM, KAREN.....1791
CHISWICK, GARY.....668, 669
CHOATE, BERNADETTE.....1246, 1247
CHOI, JIHOON.....1106, 1631
CHOI, MIN HU.....1730, 1741
CHOI, NATHALIE.....941, 1297
CHOI, SHARON.....973
CHONG, AMY.....1522
CHONG, TAMMY.1784, 1800, 1809, 1816, 1830, 1846, 1867, 1885
CHOO, SUN.....1190, 1484, 1508
CHOU, BILL.....254, 434, 435
CHOU, SUSANNA.....1662
CHOUEIRI, MICHEL.....973, 1349
CHOW, BYRON.....227
CHRISTENSEN, DIANA.....1073, 1575
CHRISTY, TYLER.....300, 301, 302
CHU, CHRISTOPHER.851, 881, 1147, 1194, 1504
CHULA VISTA FAMILY HLTH CTR. ..29
CHULA VISTA FAMILY HLTH CTR, .106
CHUN, HYUN.....436
CHUNG, ALLEN.....1886
CHUNG, PETER.....803, 898, 1168
CHUNG, SUEMIN.....1247
CHWA, JEFFREY.....812
CIAFONE, JOANNA.....1247, 1248
CIDAMBI, EMILY.....1198, 1631
CIOBANU, COSMINA.....1741, 1742
CIRIELLO, JONATHAN.1074, 1575, 1576
CLARK, DONIA.....436
CLARY, BRYAN.....1098
CLEMENT, LUIS.....1553, 1742
COBB, DAMON.....1203
COBIAN, VANESSA.....210
COBLENTZ, IAN.....906, 1214
COCKERHAM, KIMBERLY. ..1796, 1846
CODEN, DANIEL.....1830
COFFEY, CHARLES.....1029, 1030, 1455
COHEN, CARA.....227
COLEMAN, BROOKE.....1826, 1886
COLEMAN, LORI...800, 887, 1124, 1566
COLEMAN, PAGE.....1248, 1249
COMUNALE, RODERICK.....1162
CONE, STEPHANIE.....190, 291, 576
CONNER, PAMELA.....922, 923, 1249
CONNOR, CAROLINE..923, 1249, 1250
CONNOR, JEFFREY.....1827
CONRAD, HEATHER.....1484
CONRAD, RANDALL.....1847
CONRAD, SIMON.....936, 1289
CONSTANTINO, STEPHANIE.739, 740
CONTRERAS, LORETTA.....603
COOK, LEANNE.....946, 947, 1310
COOK, ROSALINE.....762
COOKISH, DAVID.....1053
COOPER, MICHAEL.....1827, 1886
CORBETT, BRYAN.....947, 1310
CORBIN, DAVID.....735
CORDES, WILLIAM.....577
CORDOBA, MIGUEL.....122
CORLEY MILNER, JANTENEE.....763
CORMAN, DANIEL.....155, 156, 437
CORNEJO PINA, RAQUEL.....90
CORONADO, MYRNA.....68, 693
CORREA, ANN MARIE.....359, 1250
CORTES, ALEJANDRO.....1106, 1631
CORTEZ, AARON.....1608
CORTEZ, JAIME.....1680

CORY, ALLISON. 302, 303, 1672
COSINO, ANJELICA. 1250
COSTELLO, MARK. 1608
COTTER, BRUNO. 1232
COULLAHAN, JESSICA. 227
COX, VICTORIA. 211
COYNE, CHRISTOPHER. 948, 1311
CRAMER, SCOTT. 1074, 1576, 1577
CRANDAL, BRENT. 1064, 1720
CRANE, CLARKSON. 1050, 1512, 1513
CRAWFORD, ELWARD. 1114
CRAWFORD, MARK. 1250, 1251, 1252
CRAWFORD, MICHAEL. 792, 878, 1190, 1485
CRAWFORD-DAY, ANN. 1777
CRAYCHEE, LEO. 752
CRIPE, TAYLOR. 1053
CRISOL, CAROLINE. 1742
CROSS, JOHN. 1437
CROUCH, DANIEL. 1373
CRUZ RODRIGUEZ, JOSE. 995, 1380, 1381
CRUZ, GUADALUPE. 1710
CRUZ, MICHAEL. 86, 688
CSAPOCZI, PETER. 502
CUMMINGS, GEORGE. 137, 202, 629
CUMMINS, ANDREW. 503
CUNNINGHAM, ISIS. 1157
CUNNINGHAM, STEPHANIE. 894
CURET, ZULMA. 228, 349
CURLEY, EDWARD. 338, 339, 340
CURRAN, BRIAN. 906, 1214
CYMBALUK, ANNA. 1502
CYPRO, ALEXANDER. 1067, 1562

D

DABU, LISA. 291
DAHMS, ERIC. 503, 504
DAIRO, BRANDON. 773, 858, 1171, 1226
DALAL, PRITHA. 1151, 1530
DALUGDUGAN, ESTHER. 694, 1663
DAMANI, SAMIR. 916, 995, 1157, 1161
DANESHMAND, SHAHRAM. 715, 716
DANG, ERIC. 1608
DANG, KAYLEE. 1609
DANG, LAUREL. 1332
DANG, TIMOTHY. 943, 1302
DANIELS, SARAH. 340
DAO, MARC. 1681
DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR. 27
DAP HEALTH-BORREGO SPRINGS COMMUNITY HEALTH CTR, ... 65, 66
DAP HEALTH-CENTRO MEDICO EL CAJON. 30
DAP HEALTH-CENTRO MEDICO EL CAJON, ... 163
DAP HEALTH-CENTRO MEDICO ESCONDIDO. 32
DAP HEALTH-CENTRO MEDICO ESCONDIDO, ... 220
DAPPEN, AMANDA. 437
DARWISH, ALEX. 906, 1215
DASCENZO, EMILY. 202
DASGUPTA, DEBORSHI. 680, 681, 682
DAVE, SHRAVAN. 967, 1341
DAVENPORT, LARIS. 937, 1289
DAVID, MARVIC. 603
DAVIDSON III, JOHN. 798, 1167
DAVIES, SUMMER. 923, 1252
DAVIES-UPPAL, ALLISON. 360, 1252
DAVIS, CHARLES. 694
DAVIS, CHRISTOPHER. 876, 1140, 1476
DAVIS, DEIRDRE. 438
DAVIS, JADE. 1887
DAVIS, JANET. 1253
DAVIS, KELLE. . 768, 780, 813, 818, 1347
DAY, CHRISTOPHER. 291, 292
DE DIOS, SARAH JANE. 776, 815, 924, 1253
DE LA CRUZ, ALEKSANDRYA. 776, 815
DE LA ROSA, JOSE. 707
DE MIK, TRAVIS. 113, 180, 258, 544, 545, 743, 744
DEACON, CASSIE. 1743
DEAN, MOENA. 1784, 1800, 1809, 1830, 1847, 1867
DECAMPS, SCARLETT. 962, 1327
DECARLI, TASIA. 303, 304, 305, 1172, 1173, 1673
DECONDE, ADAM. 1030, 1031, 1456
DECOOL, TAYLOR. 1253
DEISS, ROBERT. 1354, 1358
DEJULIO, PAUL. 914, 1226, 1227
DEL RE, AMANDA. 243
DEL RE, ANGELO. 1485
DEL ROSARIO, GELEN. 1162, 1163
DEL ROSARIO, PAMELA. 1001, 1397
DEL VECCHIO, MEGAN. 1253, 1254
DELCAMPOCASANELLES, MIGUEL. 1346
DELCORE, LAURA. 843, 1011, 1012, 1425, 1426
DEMASCO, MICHAEL. 1053
DEMESSIE, RAHEL. 360
DEMLINGER, GLENN. 1913
DEMOOR, PATRICIA. 1053
DENLINGER, TAMARA. 859
DENTICO-OLIN, MARC. 1452
DEPAOLO, AMANDA. 1777
DERISSI, DANA. 1533
DEUTSCH, KAREN. 1254
DEVERA, GEMMIE. 793, 1142, 1486
DEWOLF, SEAN. 991, 1373
DHAMIJA, ANISH. 1735, 1743
DHARKAR-SURBER, SAPNA. 264, 265, 361
DHILLON, NAVNEET. 1311
DHILLON, RACHEL. 1721
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC. 45
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC, ... 476
DIAZ, JAENAI. 1743, 1744
DIAZ, VICTOR. 937, 1290
DICKERSON, ANDREW. 851, 881, 1148, 1504
DIEP, KEVIN. 504
DIJANIC, CHRISTOPHER. 1107, 1632
DILLON, BENEDICT. 707
DILLON, MAYRA. 275
DIMAIRA, FRANCESCA. 924
DINH, MY. 716, 717, 1665
DISTEFANO, KIMBERLY. 832, 920, 921, 1239, 1240
DIXON, SARAH. 577, 578

DJEKIC, KRISTINA. 981, 1358
DO, HULBERT. 1655, 1656, 1671
DO, STEPHANIE. 1142, 1486
DOAN STEPHENS, CRYSTAL.493, 1522
DOAN, ANGELA. 1255
DOAN, CHINH. 352
DODGE, JOHN. 505
DOKICH, SRETENKA..... 245, 246, 1667
DOLLAND, STEVEN. 937, 1290
DOMINGUEZ, DENNIS. 156
DON, MICHELLE. 1046
DONALDSON, CHADWICK. 770
DONG, TAMMY. 122
DONOFRIO-ODMANN, JOY. 1486
DORINGO, ELAINIE. 123
DORN, TIA. 254
DOROS, JOSHUA. 1311
DORUELO, ASHLEY.113, 181, 259, 546, 547, 548, 744
DOSHI, AMI. 1523
DOSHI, NEELIMA. 228, 229
DOSS, KATIE. 1744
DOVE, KATHERINE. 1408
DOWNEY, NANCY. 815
DOWNTOWN FAMILY CTR AT CONNECTIONS. 50
DOWNTOWN FAMILY CTR AT CONNECTIONS, ... 476
DRAME, SALWA. 604
DRIEBE, AMY. 843, 1012, 1427, 1428
DRISCOLL, KARRIE. 925, 1255
DRISCOLL, SUSAN. 139
DROKER, BRIAN. 769
DSOUZA, NICOLE. 1744
DU, SARAH. 1534
DUARTE, KRISTEN. 1064, 1721
DUBE, BIANCA. 61
DUMMER, KIRSTEN. 1140, 1476
DUNN-PIRIO, ANASTASIE. . 1408, 1745
DUONG, CHERYL. 1827, 1887
DUONG, KIM. 1817, 1887
DUONG, MAI. 168
DUONG, NGHI. 873, 1025, 1449
DURAN, EDWARD. 832, 916
DURNAN, CASSANDRA. 812, 889, 1613
DUSTIN, ADAM. 855
DWIGHT, KATHRYN. 1107, 1632
DWYER, ERIN. 833, 1255
DY, DIANE. 90
DYER, SHARON.1784, 1801, 1809, 1831, 1847, 1848, 1868, 1887
DZIEGIELEWSKI, CLAUDIA.967, 968, 1342

E

EAGLE, SONJA. 948, 1311
EARLES, LYDIA. 767, 774, 1227
EARLEY, SAMANTHA. 1523
ECLARINO, GALELEO. 1256
EDMONDS, ERIC. 890, 1632, 1633
EDNACOT, KARYNNE. 1256
EGAN, KAITLYN. 1065, 1721
EICHENFIELD, DAWN. 1480, 1481
EISENSTEIN, SAMUEL. 1614, 1615
EKANAYAKE, PREETHIKA. 1327
EKHOLM, JANNA. 1297
EKPENYONG, ATIM. 1487
EL CAJON ADHC. 1700
EL-GHONEIMY, AHMED. 505
ELLEDGE, LINDSAY. 1722
ELSTER, JENNIFER. 1508
EMERUWA, UKACHI. 998, 1387, 1388
EPPERSON, KATRINA. 1513
ERICKSON, LISA. 1257
ESCONDIDO FAMILY HEALTH CENTER. 33
ESCONDIDO FAMILY HEALTH CENTER, ...220
ESKANDER, RAMEZ.837, 972, 1181, 1681
ESPERANZA, MELIZZA. 1745
ESPINOSA-SILVA, YAMINAH.317, 318, 755
ESTAVILLO, SAUL. 1745, 1746
ESTEINOU, ENRIQUE. 1674
ESTRADA, JOHANNA. 695
EVERETT, ELIZABETH.233, 234, 235, 305, 306, 307
EXODUS RECOVERY INC.1924, 1926, 1927

F

FABELLA, GABRIEL. 506
FADARE, OLUWOLE. 1043, 1467
FAIRBANKS, TIMOTHY.857, 1154, 1198, 1621
FALLBROOK FAMILY HLTH CTR. 36
FALLBROOK FAMILY HLTH CTR, ... 240, 241
FAMBRO, CYNTHIA. 438
FAMILY HEALTH CENTERS OF SAN DIEGO. 1941
FAMILY HEALTH CTR IBARRA. 51
FAMILY HEALTH CTR IBARRA, ...477
FAMILY HEALTH CTR OF SD- ELM ST. 51
FAMILY HEALTH CTR OF SD- ELM ST, ...477
FAMILY HEALTH CTR SAN DIEGO-OAK PARK. 47, 50
FAMILY HEALTH CTR SAN DIEGO-OAK PARK, ... 478
FAMILY HEALTH CTR SD NATIONAL CITY. 37
FAMILY HEALTH CTR SD NATIONAL CITY, ...284
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL. 45
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL, ... 479
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE. 50
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE, ... 479
FAMILY HLTH CTR SAN DIEGO-BEACH AREA. 51
FAMILY HLTH CTR SAN DIEGO-BEACH AREA, ... 480
FAMILY HLTH CTR SAN DIEGO-EL CAJON. 30
FAMILY HLTH CTR SAN DIEGO-EL CAJON, ...164
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC. 29

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC, ... 106
FAMILY HLTH CTR SD HILLCREST..52
FAMILY HLTH CTR SD HILLCREST, ... 480
FARBER, EMILY. 1018
FARRIS, AMANDA. 937, 1290, 1291
FATHER JOES VILLAGES. 1941
FATLAND, SARAH. 318, 319, 320
FAZELI, SOUDABEH. 1074, 1577
FEJLEH, ASHLEY. 906, 1215
FEJLEH, MOHAMMAD. 968
FELD, KEREN. 1257
FERMIL, YVONNE. 1257
FERNANDEZ LEYVA, JUAN CARLOS. 77
FERRAIOLO, NATALIE. 211, 250
FERRANDO, CECILE. 1012, 1013, 1428
FERRITER, STACY. 938, 1291
FEUVRIER, ARIANA. 982, 1359
FIELDING, JOSEPH. 629, 630
FIGUEROA, CHRISTOPHER. 1125
FINCH, CHRISTINA. 1516, 1612, 1613
FINK, PATRICK. 604
FINN, DAPHNA. 1722
FIREIZEN, YARON. 1516
FIRESTEIN, CATHERINE. 979, 1353
FIRESTONE, MICHELLE.1553, 1554, 1746
FISHER, JAY. 1487
FISHER, JENNIFER. 1604
FISHER, SLOANE. 1258
FISHMAN, ELENA. 578
FLEMING, DAVID. 263
FLEMING, SARAH. 784, 1397
FLEMING, TARA. 191
FLETCHER, EMILY. 123
FLORES, BERTHA. 1652
FLORES, ERNEST. 123
FLORES, JOE. 439
FLYNN, DANIELLE. 1661, 1775
FODDA, RAMI. 1652
FONTANA, LOUIS. 1777
FONTANILLA, ROBERT. 884
FOR THE VILLAGE INC, ... 763
FORCIER, NANCY. 1075, 1578
FORTUNE, ERIN. 578, 579
FORZANI, CHRISTINA. 1554, 1746
FOWLER, KATHRYN. 1075, 1578, 1579
FOX, KENNETH. 1643
FOX, SUTTON. 982, 1359
FRANK, ETHAN.847, 874, 1137, 1188, 1456
FRANK, GUIDO. 1746
FREEMAN, WANDA. 638, 639
FRENETTE, CATHERINE. 506
FRESNO, BLANCA. 124, 292
FRIEDMAN, JAIME. 579
FRIESEN, TZYYNONG.848, 874, 1137, 1188, 1457
FRUGONI, GINA. 1428
FRY, LIANE. 1747
FU, KATHERINE. 1713
FUJII, CINDY. 722, 723, 1667
FULL CIRCLE HEALTH NETWORK. 1927
FUNARI, CHRISTOPHER. 884
FUNDINGSLAND, BRENT. 907, 1215

G

GAFFEY, ANN. 1099
GAINOR, GRETCHEN. 247
GALLAGHER, JEFFERY.768, 780, 1348
GALLARES, DANIEL. 256
GALLEGOS, CYNTHIA. 361, 362
GALLO, PHILIP. 1671
GANDHI, SHEETAL. 248
GANESAN, ANUSHA. 1508
GANTA, SRUJAN. 1644
GARA, NAVEEN. 862, 863
GARCIA CABRERA, ANA. 1622
GARCIA, CALVIN. 938, 1291
GARCIA, CATALINA. 816
GARCIA, DEANA. 605
GARCIA, JENNI. 1386, 1747
GARCIA, JOHNNY. 139, 362
GARCIA, KARLA. 91
GARCIA, RAFAEL. 124, 292
GARCIA, REGINA. 1652
GARCIA, RICHARD. 1747
GARCIA, ROSEMARIE. 1711
GARCIA, TEDAYSHIA. 683, 684
GARFF, KEVIN. 1909
GARGANO-CAMPA, NICOLE. 859
GARRETT, RILEY. 907, 1216
GEBAUER, HEATHER. 1054, 1534
GEHR, MARC. 507
GENG, BOB. 1473
GENOVESE, KELLY. 1173
GEORGE, BRUCE. 1828, 1914
GEORGE, JOSE. 1108, 1633
GEORGE, KENDALL. 1827, 1914
GEPSHTEIN, YANA. 408
GERST, SCOTT. 1075, 1579
GERWER, JOHANNA. 507
GHAHREMANI, SIMIN. 124, 125
GHEBRENDRIAS, SELEMAWIT.999, 1388, 1389, 1390
GHOLIPOUR, TAHA. 1006, 1408, 1409
GI, HUNG. 728, 729, 795
GIAMONA, KRISTEN. 1554, 1748
GIANG, STEVEN. 1888
GILANI, SAPIDEH. 1031, 1032, 1457
GILIBERTO, JOSEPH. 411, 412
GILROY, LAURA. 1717
GIOVANNETTI, ERIN. 925
GIRGIS, CHERIF. 440, 529
GIRKIN, CHRISTOPHER.1021, 1441, 1442
GISH, ROBERT. 166, 287, 494
GLEASON-ROHRER, GWEN. 440, 441
GLENN, TARA. 1398
GOEB, YANNICK. 1108, 1633
GOGGIN, SAMANTHA. 580
GOH, REGINE. 907, 1216
GOLD, JEFFREY. 868, 1133, 1409
GOLDEN LIFE ADHC. 1701
GOLDFINGER, SARAH. 362, 363
GOLDING, IAN. 1476
GOLDMAN, DAVID. 788
GOLDSTONE, ADAM. 1817
GOLLOGLY, HEIDRUN. 1848, 1868
GOLU, CRISTIANA. 1663
GOMEZ, DANIELA. 717, 718, 1666
GOMEZ, JUANITA. 855, 1555, 1711, 1748
GOMEZ, LESLIE. 925, 926, 1258, 1259

GONZALEZ, JUSTINE ARIEL.....203
GONZALEZ, LISA.....938, 1291
GOODWIN, RACHEL.....941, 1298
GORDON, BRENT.....1476
GORDON, CHRISTOPHER.....157
GORDON, EMILE.....1076, 1579, 1580
GORGES, RANDA.....168, 169
GORHAM, LAURA. . 793, 879, 1191, 1487
GOSHEN, KIRSTEN.....926, 927
GOSMAN, AMANDA.....1636
GOULD, HILARY.....799, 1706
GOWDA, ASHWIN.....829
GOYAL, NIDHI.....1505
GRACE HOUSE.....1698
GRANT, PERRIETTE.....763
GRANT, REBEKAH.....548
GRAVES, JENNIFER.....1421
GRAY, IGA.....1797, 1849
GRAY, SARAH.....580, 1523
GRAYSON, ANDREA.....363, 1259
GREAR MANN, MELISSA.941, 1298, 1299
GREENE, JACQUELINE.1032, 1033, 1458
GREINER, ALEXANDER.....849, 1473
GREINER, KAREN.....1013, 1428, 1429
GRIFFITHS, KENNETH.....441
GRIFFITHS, LUKE.....1114, 1647
GRISSOM, MURRAY.....1076, 1580
GROGAN, BRIAN.....1429, 1430
GROSSMONT HOSPITAL.....1689
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC.....55
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC, ...740, 741
GROVE, JAY.....889, 1206, 1685
GRUNVALD, EDUARDO.....1359, 1360
GUADARRAMA, IGNACIO.....684
GUALTIERI, CHRISTOPHER.....1442
GUAN, HOWARD.....1910
GUERRA, JACQUELINE.....735, 736
GUIDI, CASEY.....892, 1680
GUIDO-ESTRADA, NATALIE.1134, 1410, 1422
GULLY, MICHELLE.....1157
GULOTTA, SAMANTHA.....1748
GUNDOGDU, MELEK.....1410
GUNTA, SUJANA.....340, 341
GUNTHER, HOPE.....942, 1299
GUPTA, ANUJ.....1670
GUPTA, MONIKA.....786, 820, 1658
GUPTA, TRIPTI.....916, 1381
GUPTA, VARSHA.....581
GUPTA, VINEET.....1360
GURAM, KRIPA.....1068, 1069
GUTH, CARA.....795, 1535
GUTIERREZ DAVILA, ANGELICA. . 508
GUTIERREZ, TANIA.....442

H

HA, THU.....363, 364, 365, 1259
HACINAS, REYNALDO.....684, 685
HAI, FAIZI.....491
HALEY, JESSICA.....849, 876, 877, 1477
HALEY, STEVEN.....412
HALGEDAHL, YI TING.307, 308, 309, 310, 753, 1675
HALTER, KENNETH.....1535
HAMDAN, AYAD.....974
HAMID, WAHIDA.....140, 816
HAMILTON, LISA MARIE. 212, 442, 443
HAMILTON, ROSS.769, 868, 1007, 1203
HAMMOND, CHARLES.....979, 1353
HAMPTON, DESTINY.....763
HAN, ANGELA.....1653
HAN, FREDERICK.....1126, 1228, 1229
HAN, KYOUNG.....1205
HAN, PAUL.....508, 509
HAN, SULKI.....1801, 1849
HANLEY, LAUREN.114, 181, 182, 259, 549, 550, 551, 744, 745
HANNAWI, ANDREW.....1410
HANNSUN, GEMMY.....1076, 1581
HANONO, ABRAHAM.....1829
HANONO, HELFON.....1829
HANSCH, ERNST.....1077, 1581, 1582
HANSEN, LAWRENCE.....1043, 1467
HARKNESS, RUMIKO.....927, 1260
HARMEYER, DANIEL.....938, 1292
HAROUSH, GAL.....365, 366
HARPEL, SHERYL.....140
HARRINGTON, BARBARA LORRAINE.....366
HARRIS, JEFFREY.....1033, 1034, 1459
HARRIS, PAMELA.....311, 312
HART, BECKY.....367, 1260
HARTFORD, NICOLE.....758
HARTMANN, PHILLIPP.....1505
HARVEY, SCOTT.....1013, 1014, 1430
HASEGAWA, CHRIS.....1054, 1535, 1536
HASHEM, SHIVA.....83
HASSANEIN, TAREK.....495
HASSANI, FARZANEH.....335, 336, 337
HASTANAN, CAROL.....157
HASTIE, ELIZABETH.....1360
HATEFI, DUSTIN.....890, 1102, 1197, 1627
HAYDEN HOME.....1698
HAZELBAKER, PAUL.....509
HEAD, KRISTIN.833, 860, 1126, 1173, 1260
HEADLEY, ALISON.....1411
HEALTHY CONNECT SAN DIEGO.....1927, 1928, 1929
HEFNER, ANNA.....367, 1260
HELSTEN, TERESA.....974
HENDERSON, PHILIP.....509, 510
HENDERSON, TREVOR.....581
HENDRIE, KYLE.....1722
HENDRIX, JEFFERSON.....443
HENLEY, MEARA.....639, 640
HENNEIN, LAUREN.845, 871, 1135, 1186, 1442
HENNEMEYER, CHARLES.....1077
HENNESSY, JAMES.....884
HEPOKOSKI, MARK.....991, 1374
HERMAN, ANDREA.....723
HERMANSON, KATHLEEN.....770
HERMES, MARY.....630
HERNANDEZ, GABRIELA.....1536
HERNANDEZ, JESSICA.1174, 1175, 1675, 1676
HERNANDEZ, MIRIAM.....1660
HERSKOVITZ, SCOTT.....1487
HEYMAN, BENJAMIN.....975
HIBBS, NICOLE.....582

M.فهرس الرعاية الأولية

HIETALATI, SAMANTHA.....1002, 1398
HIGGINS, JOSHUA..... 853, 1054, 1536
HIGGINSON, MICHELLE. 510
HIGUERA, EDITH. 605, 606
HILL, GENIELYN. 368
HILL, LINDA..... 625, 626
HILLDALE HABILITATION CENTER. 1696
HILLIARD, THESALONICA.368, 369, 1261
HINCHCLIFF, KATHARINE.1110, 1639, 1640
HIRSCH, JENNIFER.....942, 1299, 1300
HIRSHMAN, BRIAN. 890, 1102, 1627
HIXSON, THOMAS. 1849
HO, AMIEE.....790, 1831, 1888
HO, GORDON.....914, 1229
HO, HOANG..... 1888
HO, LYSA.....353
HO, TRAM. 1789
HOANG, CHI..... 369
HOANG, KEVIN.....1889
HODGKIN, EDWARD.....158
HOERRES, LYNN.....1261
HOFFMAN, MICHAEL. 869
HOFFMAN, STEVEN. 1889
HOGAN, NICHOLAS.....1563
HOGAN, ROSELYNN JOY.369, 370, 371
HOGARTH, MICHAEL.....982, 1360
HOGUE, BRENNA.....948, 1312
HOLLANDSWORTH, HANNAH.1098, 1622
HOLLICK, NATALIE. 125
HOLMBERG, CARRIE. 1722
HOM, DAVID. 1034, 1035, 1459, 1460
HOM, GREGORY.....1889
HONG, DANA. 1333
HONOLD, JOSE. 1398, 1399
HOO, PAMELA. ..1025, 1831, 1832, 1890
HOPPER, AUSTIN..... 1069
HORGAN, SANTIAGO.1098, 1622, 1623
HORIZON CBAS. 1702
HORIZON RECUPERATIVE CARE. 1929
HORMOZDYARAN, SANAYA. 582
HORNBEAK, KIRSTEN....827, 949, 1312
HORNEY, KRISTAN. 371
HORTON, LUCY. 1354
HOSALKAR, HETAL. 907
HOSEIN, NADEEN. 421
HOULE, STEPHANIE.....1669
HOURIHAN, KEITH. 150, 271, 413, 1125
HOUSELY, ALEXIS.....1091
HOWARD, LANDON.....939, 1292
HOWE, STEVEN.1100, 1111, 1154, 1156, 1669
HOWELL, AMANDA. 312, 313, 314
HOXMEIER, KRYSTA.....606, 607
HOYT, BRIGGS. 1022, 1443
HRYNIEWICKI, ADAM. 1312
HSIEH, STEPHANIE. 897, 1536
HSU, CHRISTOPHER. ...1801, 1817, 1849
HSUEH, JESSICA.....1022, 1443
HU, JINGJING. 1047
HUANG, GRACE.1785, 1801, 1818, 1832, 1850, 1868, 1869, 1890
HUANG, MARIA. 1524
HUANG, PETER. 1792
HUBLEY, PAUL. 91, 92
HUDSON, HENRY.1121, 1122, 1809, 1818, 1832, 1850, 1851, 1869, 1890
HUME, QUINN. 1217
HUPFELD, CHRISTOPHER. 836
HURST, MICHAEL.....708
HURT, BRIAN. 1077, 1078, 1582
HURVITZ, ANDREW.....1109, 1633, 1634
HUSSEMAN, JACOB. 1035, 1460
HUSTANA, LARA.....1833, 1890
HUTCHISON, HEIDI..... 827
HUYNH, CHI. 1891
HUYNH, LOAN.....1892
HUYNH, PAUL.....1443, 1444, 1891
HYLTON, DIANA.825, 908, 1126, 1217, 1686

I

IBANEZ, BERENICE..... 1668, 1778
IBANEZ, SIR CEDRIC. 72
IBARRA, ALLISON. 982, 1361
IBARRA, MARTHA.77, 78, 685, 776, 1261, 1262
IBRAHIM, ISLAM..... 992, 1374
IGNACIO, ROMEO.....1623
IKE, ERICA..... 736, 737, 1669
ILCHENA, ALESANDRA. 413
ILICETO, ALESSANDRO.....1007, 1411
IMPERIAL BEACH HEALTH CENTER. 36, 1922, 1929
IMPERIAL BEACH HEALTH CENTER, ...244, 245
INDA, PRISCILLA.132, 133, 795, 796, 823
INGULLI, ELIZABETH. 1514
INOCELDA, ANDREW. 770
INSTONE, SUSAN..... 372
INTEGRATED HEALTH PARTNERS. ...1917, 1920, 1921, 1922, 1930, 1931, 1943
INTERFAITH COMMUNITY SERVICES. 1920
IORIO, ALANNA. 834, 927, 1653
IRAGUIMADOZ, VICENTE.1007, 1411, 1412
ISAIAS, AGNELA. 125, 126
ISHIMINE, PAUL.....1488
ISLAM, JULIE. 152, 422
IVANOV, MARGARET. 983
IYENGAR, RADHA. 75
IYER, VICTORIA..... 927

J

JABBOUR, MOUSSA..... 983, 1361
JABRI, ZAIN. 169
JACKSON, DANA..... 191, 192, 262, 263
JACKSON, GAVIN.....510, 511
JACKSON, MADELEINE.....1634
JACKSON, MEGAN..... 1312
JACOBS-KLEISLI, MILAGROS. 126
JACOBSEN, GARTH.856, 1099, 1623, 1624
JACQUES, KAYLA..... 1007, 1412
JAFFRAY, JULIE. 1509
JAFFRAY, PAUL.....1078, 1583
JAIN, ALEXANDRA. 803
JAINCHILL, AMANDA. 444
JAMES, CHRISTINE. 1209

JAMISON, KAREN. 511
JANNESARI, ROYA. 860
JARDON, JAVIER. 186
JAZAYERI, AMIR. 1148, 1505
JEFFERIES, KATHLEEN. 1438
JENKINS, ENCHANTA. 718, 719
JENNINGS, AMY. 1778
JENSEN, BRIAN. 1196, 1732
JEWISH FAMILY SERVICE OF SAN DIEGO. 1939
JI, AMANDA. 747, 748
JIANG, WEN. 875, 1138, 1460
JIMENEZ BACARDI, ADRIA. 1524
JIMENEZ, ANDREA.803, 804, 898, 1168
JIMENEZ, KRYSTAL. 92
JIMENEZ, NANCY. 1778
JINDAL, ANUJA.841, 868, 1133, 1184, 1524
JOHN, MIRA. 992, 1374, 1375
JOHN, TANNER. 1333
JOHNSON, DANIEL. 92, 93, 244
JOHNSON, KENNADY. 1609
JOHNSON, SHAWNA. 372
JOLICOEUR, MEGAN. 965, 1333, 1334
JOMOC, CAITLIN.1025, 1026, 1449, 1450, 1833, 1892
JONES, CHRISTA. 928, 1262
JONES, SETAREH. 192, 193
JORDAN, JAMIE. 582
JOSHI, YASH. 1749
JOSHUA, JISHA. 1067, 1563
JOYCE, ROBERT. 1913
JU, NATHANIEL. 755
JUANG, PATRICIA. 963, 1328
JUAREZ, AMERICA. 1706
JUAREZ, LETICIA. 200, 201, 620
JUAREZ, PATRICIA. 583
JUSTINO, HENRI. 1477

K

KADER, ANDREW. 1114, 1647
KAFRI, HASSAN. 177
KAHL, NICHOLAS. 58, 206
KAHLY, BROOKE. 1710, 1713
KAKISH, DAVID. 1078, 1583, 1584
KALBAKJI, NATALY.1785, 1810, 1818, 1834, 1851, 1869, 1870, 1892
KALRA, ANKUR. 1792, 1870, 1911
KAMDAR, BIREN. 992, 1375
KAMOTO, LYNN. 729
KANDAHARI, MASOOM. 780
KANE, CHRISTOPHER. 1115
KANNAN, SWATI. 1302
KANSAL, LEENA. 1008, 1413
KANTAS, PARIS. 686
KARANDE, PRACHI.804, 805, 898, 1168
KARAPETIAN, ELENA. 1818
KARCHES, KELLI. 512
KARI, ELINA.1035, 1036, 1037, 1138, 1461
KARMAKAR, KANKA. 583
KASAI, SARAH. 1880
KASAWA, JOHN. 158
KASEY'S HOME. 1695
KATIBIAN, DAVID. 1506
KATZ, YISRAEL. 983, 1361
KATZMAN, BARRY.1785, 1802, 1852, 1870, 1893
KATZMAN, LEE. 1797, 1851
KAUFER, DAVID. 708, 709
KAUFHOLD, ANNE.61, 62, 68, 69, 695, 696
KAUFMAN, JENNIFER. 444, 445
KAUNITZ, GENEVIEVE. 1302
KAUR, JATINDER. 212, 348
KAWASAKI, MEGAN. 908, 1217
KAZEM, AHMAD. 414
KAZEM, HARON. 84
KEARNS, MARK. 1111, 1112
KEDDINGTON, JOAN. 1792, 1871, 1912
KEEN, WILLIAM. 916
KEFLEZIGHI, BAHGHI. 445
KEHOE, KATRINA. 1293
KELCHNER, MATTHEW. 60, 733, 734
KELLEHER, BRIDGET.235, 236, 314, 315, 753, 754, 892, 1175, 1176, 1676, 1677
KELLER, BENJAMIN. 1637
KELLOGG, KRISTEN. 141
KELLY, KATHERINE. 1179
KELNER, MICHAEL. 1049, 1472
KEMP, KATHRINE. 373
KESANAPALLI, DEEPTHI. 584
KETCHEL, CLINT.320, 321, 322, 323, 324, 756
KEUM, SARAH. 777
KHAFAJA, MOHAMAD. 1723, 1749
KHALIGHI, PAYMAN. 1893
KHALIL, VADY.1785, 1802, 1810, 1819, 1834, 1852, 1871, 1893
KHAMISA, SORAIYA. 1749
KHAMISHON, BORIS. 1413
KHAN, ALIYA. 182
KHAN, FAHAD. 1894
KHAN, MATTHEW. 373
KHAN, SHAHFAR. 1488
KHANNA, ARJUN. 1102, 1103
KHANNA, POORNIMA. 512
KHARE, MANASWITHA. 1525
KHATIB, NORA. 1444
KHIEU, TINA.1786, 1802, 1810, 1819, 1834, 1853, 1871, 1872, 1894
KHINDA, SUNEHA. 1828, 1894
KHURANA, AMAN. 1079, 1584
KI, TRISH. 374
KIDANE, ZINNIA. 1262
KIDDER, BRENDAN. 445, 446, 1334
KIM MCMANUS, OLIVIA.842, 869, 1134, 1414
KIM, DANIEL. 1195
KIM, ELIZABETH. 908, 1218
KIM, GRACE. 1303
KIM, JENNY. 1793
KIM, JOHN. 1437
KIM, MICHAEL. 1187, 1188, 1682, 1683
KIM, MICHELLE. 1204
KIM, PHILIP.1026, 1450, 1819, 1835, 1894
KIM, SHANNON. 1227
KIM, YUHEE. 255
KIM, YUNMI. 1157, 1263
KINDRED HOSPITAL SAN DIEGO. 1689
KING CHAVEZ HEALTH CENTER. 46

M.فهرس الرعاية الأولية

KING CHAVEZ HEALTH CENTER, ...480, 481
KING, MARY. 1793, 1872, 1912
KINGDON, JOANNA. 1143, 1191, 1488
KIRKLAND, STEPHANIE. 237, 238, 893
KLAREN, AMANDA....1819, 1895
KLIGIS, GABRIELLE. 1750
KLINE, LANNING. 1444
KLING, KAREN.857, 891, 1154, 1199, 1637, 1638
KLUEMPER, NICOLE....1555, 1750
KNOX, LATANIA. 763
KNUTSON, THOMAS. 891
KOBAYASHI, KAREN....1666
KODSI, ALICIA....193
KOHATSU, KAREN. 1431
KOHLI, KANCHAN. 1723, 1751
KOHOUT, KATHRYN....1653
KOLAR, MATTHEW....1303
KOLB, FREDERIC....1640, 1641
KONDILI, DHIMITER. 1079, 1585
KOO, ANITA. 790, 821, 873, 1164, 1165
KORMANIK, PATRICIA...834, 928, 1677
KORSAND, SID. 126, 127
KOSEL, MATTHEW. 670, 671
KOTHA, PURUSHOTHAM. 1115
KOUSARI, JHALEH. 641, 642
KRAK, MICHAEL. 758, 1489
KRAMER, MELISSA. 341
KRAPES, MICHAEL. 1196, 1733
KRAUSE, AMANDA. 968, 969, 1342
KRAUSE, MARTIN.826, 914, 1126, 1225, 1686
KRESHAK, ALLYSON. 949
KRIJGER, LISA. 513
KRISHNAMURTHY, MEENAKSHI.801, 1167
KROL, CAITLIN. 908, 1218
KRUCKENBERG, KATHERINE.1751, 1752
KRUMMEN, DAVID. 1381
KRYSHTAFOVYCH, SOLOMIYA.949, 1313
KUIOKA, TROY. 203
KULASA, KRISTEN. 963, 1328
KULISCHAK, JOHN....1835, 1895
KUMAR, AVNEE. 1153, 1687
KUMAR, SOMA. 1342
KUO, DENNIS. 1509
KUO, SELENA. 969, 1343
KUPELIAN, CHLOE....1117, 1353
KUROSAKA, MOMO. 1335
KURZ, TROY. 1707
KUTZ, CRAIG. 949, 950, 1313
KVIATKOVSKY, MILLA. 984, 1361

L

LA COSTA HOUSE....1695
LA MAESTRA CHC EL CAJON BROADWAY. 29
LA MAESTRA CHC EL CAJON BROADWAY, ...164
LA MAESTRA CHC-REA AVE....30
LA MAESTRA CHC-REA AVE, ...165
LA MAESTRA COMMUNITY HEALTH CENTERS. 1918, 1923, 1925, 1931, 1932, 1933, 1934, 1935, 1936
LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT. 52
LA MAESTRA COMMUNITY HEALTH CENTERS - 4074 FAIRMOUNT, ...481
LA MAESTRA FAMILY CLINIC INC.31, 38, 52
LA MAESTRA FAMILY CLINIC INC, ...165, 284, 481, 482
LACH, REBECCA. 446, 447
LACHARITE-ROBERGE, ANNE-SOPHIE. 996, 1382
LAD, NIKISHA. 1730
LAFORTEZA, JOZELLE....1263
LAFREE, ANDREW. 950, 1313, 1314
LAGO HERNANDEZ, CARLOS.984, 1362
LAI, AMARA. 213
LAIDLAW, JOHN....1752
LAINE, LESLIE. 1263, 1264
LALITHAKUMARI, ARYA. 513, 514
LAM, ANNE....1836, 1895
LAM, KHANH. 774, 1240
LAM, MICHAEL. 985, 1362
LAMALE-SMITH, LEAH.844, 870, 1014, 1431
LAMANTIA, MICHELE. 514, 515, 709
LAMBERT, GAGE. 1537
LANDEO GUTIERREZ, JEREMY. 1517
LANDIS, SARAH. 854
LANE, BRIAN. 1399
LANE, KIMBERLY.777, 813, 834, 928, 1116, 1264, 1265
LANG, LESLIE. 1176
LANIOUS, OKSANA. 1555, 1752
LANTRIP, KEATON. 939, 1293
LANUZA, MARK J. 276
LAPINA, LORI. 607, 608
LARA, LESLEY. 93
LARSEN, JULIE. 1438
LASALLE, ELIZABETH.850, 877, 1140, 1189, 1477
LASOFF, DANIEL. 950, 951, 1314
LASSWELL, EVE. 1065, 1723
LATHAM, EMI. 1314
LAU, KUEN CHINE....1896
LAURENT, LOUISE. 838, 999, 1390
LAVEMAN, EVAN. 951
LAVERTY, CHAMINDRA....1414
LAW, KAREN. 276
LAWRIE, ALISA....584
LAZAR, DAVID. 1638
LE ROUX, MICHELLE. 980
LE, CRYSTAL. 867, 1400
LE, DIANA. 201, 620, 621, 622
LE, HUAN. 1564
LE, NGUYEN. 584
LE, TAM. 1820
LE, TAYLOR. 823
LEDBETTER, ALEX....1723, 1752
LEE, AUSTIN. 1872
LEE, BEGEM. 1525
LEE, DAVID. 1008, 1414, 1415, 1724, 1753
LEE, JASON. 1811, 1820, 1896
LEE, JENNIFER. 1055, 1537
LEE, JIHYUNG....921, 1240, 1241
LEE, KAREN. 1349
LEE, RYANT. 630, 631
LEE, SALLY. 1853

M.مؤشر مقدمي الرعاية الصحية الأولية

LEE, SANDRINE. 448
LEGACY CARE ADHC CBAS.... 1702
LEHNERT SCHUCHARDT, ELEANOR. 1478
LEIBEL, SYDNEY....1474
LEMON GROVE FAMILY HEALTH CENTER. 37
LEMON GROVE FAMILY HEALTH CENTER, ... 255
LENHART-PENDERGRASS, PATRICIA. 853, 1149, 1194, 1517
LENNON, RYAN. 374, 375
LEONARD, BEVERLY... 78, 141, 142, 737
LEONARD, LISA. 1682
LEPEZ, DAVID. 696
LETENDRE, SCOTT....1363
LEUIN, SHELBY. 848, 875, 1189, 1462
LEUTE, ERIC. 277
LEVERONE, NICHOLAS.831, 1068, 1153, 1363, 1688
LEVINE, MATTHEW....422, 423
LEVY, AVIYA. 882, 1519
LEVY, MICHAEL....1627
LEVY, PHILLIP. 1854
LEWIS, MICHAEL. 1644
LEWIS, PRIYA....1641
LI, ALEXANDRIA....1445
LI, HOJUN. 1509
LI, JINGHONG.951, 952, 992, 1128, 1564, 1686
LI, KINCHEON. 1509
LI, XIA. 1724, 1753
LIBERTANA HOME HEALTH OF SHERMAN OAKS. 1943
LIEBER, CAROL. 66
LIEPERT, AMY. 1617
LIGHTBRIDGE HOSPICE LLC. 1938
LIM, GARRETT...1079, 1080, 1585, 1586
LIM, IMELDA. 265, 266, 375, 1158
LIM, STEVE. 1714
LIN, CHRISTINE. 993, 1375, 1376
LIN, HENRY. 1896, 1897
LIN, JOYCE. 1055, 1056
LIN, SHINKO..... 817, 1159, 1200, 1303
LIN, TOM. 1506
LINARES, YENDI. 759
LINDA VISTA HEALTH CARE CTR. .. 48
LINDA VISTA HEALTH CARE CTR, ... 482, 483
LINDBACK, SARAH. 349
LINDEMAN, KURTIS. 449
LINDEMANN, CHRISTINA. 1537
LINDSEY, SABRINA. 860
LIOTTA, BENJAMIN. 952, 1315
LIOU, ANGELA. 1510
LIOU, YUJIE. 1304
LIPARI, RACHEL. 1018
LIPPI, MATTHEW. 953, 1316
LIPSCHITZ, LISA.114, 115, 182, 183, 260, 551, 552, 553, 554, 555, 745
LIU, ANDREW....1183, 1184
LIU, SHANGLEI. 1095, 1615
LIU, TIMOTHY. 1753, 1754
LIU, YUNXIANG. 1445
LIU-BARBARO, DOROTHY. 250
LLANES, BENJAMIN. 1897
LLOYD, MATTHEW.... 608, 609
LOEFFLER, ALLISON.655, 656, 1185, 1659
LOGAN HEIGHTS FAMILY HEALTH CENTER. 46, 47
LOGAN HEIGHTS FAMILY HEALTH CENTER, ...483
LONGARDNER, KATHERINE.1415, 1754
LOPER, KAREN....585
LOPEZ, JOANNA. 1712
LOPEZ, MARIBEL. 1779
LOPEZ, MARIO. 609, 610, 748
LOPEZ, NICOLE. 1096, 1615, 1616
LOPEZ, XIMENA.... 1150, 1525
LORENZO, PATRICIA. 423
LOSTETTER, ADRIENNE. 350
LOUGH, MICHELLE....449
LOVERN, JENNIFER. 414
LOVING CARE ADHC. 1703
LOZIER, JEFFREY....1204
LU, JULIE. 450
LU, TAMMY. 142, 375, 376
LUHAR, RIYA. 530
LUI, ASONA....1069, 1070
LUJAN, ARLEEN. 585
LUKACZ, EMILY.....965, 966, 1339
LUM HO, RACHEL....1659
LUM, YUIN-WAH. 266
LUNA, ABIGAIL. 895, 1266
LUNDEBERG, HOLLY. 1754
LUONG, TRAN. 1056
LUSBY, FRANKLIN....1836
LUSCHWITZ, BRIAN.... 759
LUU, DANIEL. 1301
LUU, JACKIE....1056
LWIN, THUTHIRI. 1668
LY, BINH. 953, 1316

M

MA, GARY.... 996, 1382
MA, JANET. 996, 1382, 1383
MAC, VICTOR. 342
MACIAS, ALISSA. 642, 643, 644
MACINTYRE, ELIZABETH....343
MACKAY, GILLIAN.844, 1014, 1015, 1432
MADANY, GEORGE.... 586
MAGEE, ANNA. 1718
MAGNOLIA ADULT DAY HEALTH CARE.... 1701
MAHENDRAN, SRIVIDYA.... 586
MAHMUD, EHTISHAM. 1383
MAHTA, ALI. 1008, 1415
MAJITHIA, AMIT.... 985, 1363
MALAK, LAWRENCE. 1707, 1755
MALEK, MIKHAIL. 864
MALHOTRA, ARATI..... 660, 661, 662
MALINAK, JAMES....170
MALONEY, IAN.... 909, 1219
MALONEY, NOLAN....1304
MAMAS KITCHEN....1938
MANCHEL, BRUCE.134, 135, 622, 732, 733
MANDEVILLE, ROSS. 786, 820, 1658
MANDOYAN, AUSTIN..... 159, 450, 451
MANGENE, CYNTHIA. 142, 143
MANGINE, REGINA....737
MANI, NASRIN. 186, 187
MANNEN, JOSEPH. 1797, 1854

M.فهرس الرعاية الأولية

MANNINO AVILA, ELIZABETH. 1526
MANNINO, ELIZABETH. 251
MANRIQUEZ-CASTILLO, ERENDIRA. 586, 587
MANSY, TAMARA. 170
MANZO, CORINA. 376, 1266
MAREK, MAKSYM.....787, 820, 1658
MARINO, NIKOLAS..... 985, 1363
MARISCAL, MIGUEL. 796
MARKS, ROBERT. 1080, 1586
MARLAY, GREG. 1873
MAROLLA, ALICE. 1092
MARR, RYAN..... 1854, 1897
MARSHALL HOUSE.....1698
MARSHALL, LAWRENCE. 1103, 1627
MARSTON, JACQUELINE. 451, 452
MARTIN, FREDERIC. 530, 531
MARTIN, HALEY. 1057, 1537
MARTIN, RIA.....377
MARTIN, THOMAS. 1355
MARTINEZ, BRIANNA..... 1335
MARTINEZ, CAROLYN. 377, 1266
MARTINEZ, NORAYMA. 1714
MARTINEZ, STEPHANIE.1707, 1724, 1755, 1756
MARTINEZ-ANDREE, INGRID. 587
MARTINEZ-MURGUIA, IRENE.295, 610, 611
MARYOUNG, ALLISON.1786, 1803, 1820, 1836, 1854, 1855, 1873, 1898
MASCARENO, EFRAIN. 1793
MASCH, JESSICA. 1617
MASON, MATTHEW. 1316
MASSENBURG, BENJAMIN.1641, 1642, 1643
MATICH, BRANKO. 453, 454
MATOBA, NANA..785, 1002, 1400, 1401
MATSUOKA, AKIHIRO.1037, 1038, 1462
MAURIZ, GRAZIANO. 1718
MAXWELL, BENJAMIN. 1724
MAXWELL-JUNGE, MELISSA. 1710
MAY, LOUIS. 171, 709, 710, 818
MC ELROY, CARTER. 1609
MCADAMS, JOSEPH. 1057, 1538
MCALISTER INSTITUTE. 1938
MCAULEY, ROBERT.....1718
MCCALLUM, JAMES. 424
MCCAMMACK, BRADLEY. 343, 344
MCCANDLESS, RACHEL. 1140, 1478
MCCLEAN, ESMERALDA.1026, 1837, 1898
MCCULLEY, DAVID. 1401
MCCULLOUGH, LYAN LOVE. 1158
MCCULLUM, TIFFANY.....1556, 1756
MCDANIEL, LISA. 324, 325
MCDANIEL, MICHELE. 1050, 1489
MCEVOY, ANNE.....1490
MCFARLAND, NATHAN..... 252, 515
MCGEE, JACQUELINE..... 772, 888
MCGHEE, JULEA. 1714
MCGRAW, JOSEPH.1786, 1811, 1821, 1855, 1873, 1874, 1898
MCGUIRE, WILLIAM. 1068, 1565
MCHENRY, KATHRYN. 213, 214
MCINTYRE, RYAN. 69
MCKENNETT, MARIANNE. 94
MCKINNEY, SARA.844, 1015, 1432, 1433, 1434
MCKNIGHT, TRISTAN. 1470
MCLAUGHLIN, ERIK. 1335
MCMAHON, SHARON. 127
MCMURREN, BRITTANY. 1803
MCNEALY HOUSE. 1696
MEADOWS, AUDRA. 1015, 1016, 1434
MEAGHER, RAISHELLE. 1780
MEASER, JACQUELINE. 909, 1219
MEDAK, ANTHONY. 954, 1317
MEDINA, ALEXANDER. 277, 278, 1159
MEDINA, RUBELETA. 1266
MEDZED PHYSICIAN SERVICES INC. 1917
MEIER, EMILY.....1556, 1756
MEKEEL, KRISTIN. 1645
MELBER, DORA.783, 866, 1000, 1118, 1131, 1181, 1390, 1391
MELENDEZ, ARIANA... 1016, 1434, 1435
MELGAR, MONICA. 454, 455
MENDENHALL, ANNA. 205
MENDES, CHANTAL. 793, 879, 1490
MENDEZ, ANDRES.....1065, 1725
MENDEZ, DIEGO. 115, 183, 719
MENDEZ, JESUS. 133
MENDOZA, GRETEL MARIE..378, 1267
MENDOZA, RAYMUNDO..... 1874
MENON, POOJA..... 94
MERALI, MURTAZA. 1856
MERCADO FORSECK, ALEJANDRA. 764
MERCER, KELLY.197, 198, 295, 296, 611
MERGENTHALER, SIGRID..... 1775
MERRILL, COREY. 1058, 1538
MERRILL, SARAH. 95
MERTE, BRYAN. 1317
MESINA, OMAR. 1435
MESIWALA, ADNAN. 1143, 1490
METCALF, ASHLEY. 1491
MEYER, MEGAN. 909, 1220
MICHAEL, RAMI.....171, 818
MICHALOWSKI HOME. 1695
MICHEL, MATTHEW.....1634
MICK, SHARON.....928, 929, 1267
MID-CITY COMMUNITY CLINIC.....52
MID-CITY COMMUNITY CLINIC, . .484
MIDORO, ABEGAILLE.. 1158, 1159, 1268
MIGNEA, DAVID. 137, 204, 631
MILDER, EDMUND.....1512
MILES, RENEE.....1718
MILLAR, MELISSA. 1220
MILLER, DIANA. 325, 326, 1180
MILLER, DONALD.....345
MILLER, EVA. 1268
MILLER, JULIE. 1684
MILLER, LAUREL. 611, 612
MILLER, WILLIAM. 635
MILLS, BRAD. 1757
MILLS, DAVID. 1143, 1491
MILLS, MORGAN. 567
MILLS, TATYANA. 1526
MINOKADEH, ANUSHIRVAN.....826
MIRACLE, ANGELYN. 1127, 1669
MIRON, JEAN-PHILIPPE. 1757, 1758
MISTRY, CHETAN. 127
MITCHELL, NORA. 1725
MIZOGUCHI, LIANNE. 1837, 1899
MIZZELL, ANNA. 917, 1232

MODHWADIA, MAMTA. 1735
MOELLENHOFF, MICHAEL. 909, 1220
MOHAMEDALI, BURHAN. 781, 819, 865, 1383, 1384, 1656
MOHAMEDI, NADIA. 278
MOHEBBI, ATHENA. 930, 1269
MOLINOS, NICOLE. 249
MOLL, ANGELA. 846, 871, 1135, 1186, 1445, 1811, 1821, 1899
MONAHAN, CAROLYN. 662
MONARCH HOME. 1697
MONGA, MANOJ. 1648
MONTANE, RUBEN. 1301
MONTEZ, REBECCA. 1733
MONTGOMERY HOUSE. 1698
MONTOYA, JESSICA. 1556, 1758
MOODLEY, AMARAN. 1355
MOONEY, PATRICIA. 1653
MOOR, TRACY. 1837, 1838, 1899
MOORE, SARAH. 858, 1115, 1649
MOORE, SHAVON. 1725, 1758
MORALES, ALEJANDRA. 455
MORAN, CHRISTINA. 886, 1715
MOREIRA, LUCILA. 350
MORENO, MARIO. 1080, 1586, 1587
MOREO, HUNTER. 1538, 1539
MORGAN, HUNTER. 1856
MORRIS, CHAD. 824, 825
MORRIS, SHEILA. 788
MORRISON REYES, JOSHUA. 1787, 1811, 1821, 1838, 1856, 1874, 1875, 1900
MORTIMER, DORI. 350
MOSHTAGHI, OMID. 1122
MOSTOFIAN, EIMANEH. 656, 657, 658
MOUSSAVIAN, MEHRAN. 178, 527, 528, 712, 713
MOVAGHAR, MANSOOR. 846, 872, 1023, 1136, 1186, 1446, 1822
MOYA, MARY. 95, 696, 697
MUHAMMAD, LAMA. 1758, 1759
MUNCADA, CAESAR. 1019
MUNCE, DANIELLE. 1364
MUNDAE, RUSDEEP. 789, 821, 872, 1164
MUNOZ, EMMANUEL. . 644, 645, 1654
MUNRO, KRISTA. 930
MURADIAN-MOORE, SARAH. 822
MURRAY, MATTHEW. 1491
MURTHY, NIKHIL. 772, 1103, 1197
MUTH, NATALIE. 76
MUUS, SUSAN. 930, 931

N

NACOSTE, LAKEISHA. 931
NADI, FAHIMA. 172
NAGELBERG, JODI. 152, 153, 424, 963, 1328, 1329
NAGHI, JESSE. 781
NAGNUR, PRITI. 194
NAIK, SHILPA. 194
NAJAFI, DAVID. 565
NAJAND, SADAF. 1201
NAKAMITSU, ABIGAIL. 1539
NAKAMURA, MELANIE. 214
NAKAMURA, TIFFANY. 1386, 1759
NARANJO, RODRIGO. 515, 516, 517
NARAYAN, ARCHANA. 172, 173
NARAYAN, HARI. 850, 877, 1141, 1478
NARAYANAN, MEENA. 517, 741
NAREZKINA, ANNA. 917, 1232, 1233
NASSAR, JEANNE. 1539
NASSIR, BASSAM. 159
NATH, DEVARSHI. 647, 648, 649
NATHAN, CARLY. 943, 1300
NAUDIN, VERONICA. 759
NAVARRETE CELESTINO, MISHEL. 671, 672, 1661
NAVARRO, STEVEN. 860
NAVARRO, VANESSA MARIA. 278, 279, 455, 456, 1160, 1663
NAYER, ZACHARIA. 1023, 1446
NCHOTU, SUCCESS. 884
NEGRON, RICARDO. 231
NEIGHBORHOOD HEALTHCARE. 55, 56
NEIGHBORHOOD HEALTHCARE ESCONDIDO. 31
NEIGHBORHOOD HEALTHCARE ESCONDIDO, ... 220, 221
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER. 43
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER, ... 348
NEIGHBORHOOD HEALTHCARE LAKESIDE. 37
NEIGHBORHOOD HEALTHCARE LAKESIDE, ... 251
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL. 31
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL, ... 221
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL. 32
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL, ... 221, 222
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY. 32
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY, ... 222
NEIGHBORHOOD HEALTHCARE, ... 749, 750, 752
NEJATI, FRESHTA. 1269
NESTOR COMMUNITY HEALTH CENTER. 45
NESTOR COMMUNITY HEALTH CENTER, ... 485
NEVAREZ, IRENE. 267, 378
NEVES, VANESSA. 662
NGO, MAI. 1150, 1526, 1527
NGUYEN, ALEXANDRA. 805
NGUYEN, ANTHONY. 1350
NGUYEN, BERLINDA. 1880
NGUYEN, BRUCE. 1901
NGUYEN, CARIE. 96
NGUYEN, DANIELA. 327, 328
NGUYEN, HARRY. 1610
NGUYEN, HOANG. 1726, 1759, 1760
NGUYEN, JANICE. 587
NGUYEN, JASMINE. 1900
NGUYEN, JULIA. 1726, 1760
NGUYEN, KHANH. 1539, 1540
NGUYEN, LINH. 96, 97
NGUYEN, MARGARET. 1492
NGUYEN, MICHELLE. 985, 1364
NGUYEN, MYLINH. 1492

M.فهرس الرعاية الأولية

NGUYEN, NGOC.....456
NGUYEN, NINA.....379
NGUYEN, QUOC SY.....910, 1221
NGUYEN, THANH.....1900
NGUYEN, THERESA.....1793, 1875, 1912
NGUYEN, THY.....1857
NGUYEN, TIA.....806, 899, 1169
NGUYEN, TRACY.....1794
NGUYEN, TRUC.....128
NGUYEN, VANESSA.....816, 1654
NGUYEN, VI.....194
NGUYEN, VIET.....1901
NGUYEN, VUONG.....855, 1089, 1605
NGUYEN-CLEARY, THAI.....456, 457
NHAN-CHANG, CHIA-LING.838, 1000, 1392
NIAKAMAL, EVAN.....885
NIAZI, HARRIS.....160, 457
NIBBELINK AHEARN, SANDRA.1176, 1177
NICHOLAS, ESTELA.....1677
NIEMI, ANNA-KAISA.785, 1346, 1401, 1402
NIGRO, JOHN.....1645
NIKZAD, JASON.....279, 697
NISHIKAWA, MOENA.....760
NISKANEN, RACHEL.....1880
NISSAN, BETI.....724
NOCEDA, ANA.....379, 380
NOKES, BRANDON.....986, 1364
NOLASCO, JOANNA.....279, 280
NOORI, SARA.....1828
NORMAN, MARC.1556, 1557, 1760, 1761
NORRIS, JEFFREY.....457, 458
NORTH PARK FAMILY HEALTH CENTERS.....49
NORTH PARK FAMILY HEALTH CENTERS, ...485, 486
NORTON, CALEB.....1269, 1270
NOSTE, ERIN.....954, 1317
NOUREDDIN, NABIL.....969, 970, 1343
NOVENCIDO, ANDREW.807, 808, 899, 900, 1169
NOVIKOV, YEVGENY.....986, 1365
NOVOTA, GABRIELA.....345
NUNO, JOSE.....612
NUQUI, JOSIE.....458
NURTURING CARE LLC.....1926
NUTAITIS, ALEXANDRA.....1016, 1435
NYMAN, KATHERINE.785, 840, 1003, 1132, 1402, 1403

O

O HALLORAN, HENRY.1812, 1822, 1901
OCAMPO, ELAINE.....381, 382
OCEGUEDA, JOSHUA.....280
OCHOA, ERLINDA.....143, 144, 267, 268
OCHOA, RAUL.....688
OCONNELL, STEFANY.....895, 1270
OCONNOR, ERICA.....76
ODA, THAGHAR.144, 145, 382, 383, 384
ODISH, MAZEN.....993, 1376, 1377
ODONNELL, F.....1403
ODONNELL, NICOLE.....861
OHALLORAN, HENRY.846, 872, 1136, 1187, 1447
OIRA, VICTORIA.....128
OKADA, MICHELLE.....1058
OKAMOTO, VINCENT.....910
OLIVER, DEANNA.....492
OLSEN, MARTIN.....415
OMAE, ILANA.....764
OPARA, CHINYERE.....895, 1270
OPEN ARMS ADHC.....1700
OPEN ARMS ADULT DAY HEALTHCARE.....1700
OPERATION SAMAHAN - MIRA MESA.....48
OPERATION SAMAHAN - MIRA MESA, ...486, 487
OPERATION SAMAHAN - NATIONAL C.....39
OPERATION SAMAHAN - NATIONAL C, ...285
OPERATION SAMAHAN GRANGER SCHOOL BASED.....38
OPERATION SAMAHAN GRANGER SCHOOL BASED, ...285
OPERATION SAMAHAN RANCHO PENASQUITOS.....44, 47
OPERATION SAMAHAN RANCHO PENASQUITOS, ...418, 419, 487, 488
OREJEL, EDITH.....1271
ORFF, HENRY.....1557, 1761
ORIENTE HOUSE.....1698
ORPILLA, IMELDA.....384, 385
ORR, JEREMY.....1377
ORTEGA, LUIS.....698, 1663
ORTIZ, BEVERLY.....1733
ORTIZ, KENNETH.....69, 70
ORTIZ, MARIA.....1557, 1761
OSORIO, JOSEPH.....1104, 1628
OSSAREH, DIBA.....1794
OSWALD, JESSICA.....910, 1221
OU, JOCELYN.....1798, 1857
OWEN, MICHAEL.....78, 79, 386, 387
OZCAN, ALI.....1144, 1492

P

PACIS, NOAH.....1271, 1272
PADE, KATHRYN.....1493
PADILLA, MICHELE.....387
PAGE, BIANCA.....249
PAGE, BRADY.....830, 993, 1377
PAI, SARAH.....1272
PAKENHAM, KATE.....834
PALOMAR HEALTH.....1689
PALOMAR MEDICAL CENTER.....1689
PALOMAR REHABILITATION INSTITUTE.....1690
PALOMINO, MARY.....97
PANDHI, JAY.....1161
PANDYA, BHUMIKA.....1803, 1857
PANEK, JOHN.....623, 1549
PANICKER, CIBU.....328, 329
PANNARAJ, PIA.....1355
PANSARA, MEGHA.....1822
PANZARINI, BRUNO.....1081, 1587, 1588
PAPASTERGIOU, GEORGIOS.119, 120, 187
PAPPALARDO, ASHLEY.....1272
PARADISE VALLEY HOSPITAL.....1690
PARAST, MANA.....1043, 1467
PARIKH, MILIND.....173, 517, 518

M.مؤشر مقدمي الرعاية الصحية الأولية

PARK, BRIAN. 1144, 1493
PARK, DANIEL..... 710
PARK, JAY..... 954, 1318
PARK, RONALD..... 345, 1191, 1493
PARK, SOO..... 975
PARK, TARI..... 588
PARKER, LESLIE. 1019
PARKER, SHERINE. 879, 1192, 1494
PARKS, MONICA..... 1681
PARRY, LISA. 856, 1096, 1616
PARSONS, GENEVIEVE. 248
PARSONS, MEKRAE. 1654
PARTNERS IN CARE FOUNDATION. 1942
PASCUA, RYAN..... 897, 1365
PASCUAL, CHRISTOPHER.808, 900, 1170
PASSIAK, BRITTANY..... 1184, 1416, 1422
PASSIAS, BRADEN..... 1109, 1634
PASTORES, GLEN. 1761
PATEL, AARTI..... 1527
PATEL, CHARMI. 1044
PATEL, DEVIN. 1649
PATEL, GITANE.1787, 1803, 1823, 1858, 1875, 1902
PATEL, JANKI. 836
PATEL, JITENBHAI..... 214, 215
PATEL, KELLY..... 388
PATEL, MITESH..... 1733, 1734, 1781
PATEL, PRIYA. 931
PATEL, SAGAR. 1129, 1687
PATEL, SARJAN.1787, 1804, 1822, 1858, 1875, 1902
PATEL, SHREYA..... 198, 199
PATEL, VIJAY.848, 875, 1139, 1189, 1463
PATHWAY HOME SOLUTIONS INC. 1926
PATIAG, DANIEL. .. 388, 389, 390, 1273
PATTERSON, MARY..... 1150, 1503
PATTON, MICHAEL. 1762
PAUL, MEGAN. 1350
PAULSON, KERRY. 932
PAVLOVICH, WENDY. 588
PEARCE, ALEX. 1068, 1565
PEARSON, LAWRENCE..... 242
PEDROTTY, JOHN. 97, 98
PELHAM, WILLIAM..... 1066, 1726
PELIO, DARREN.854, 1058, 1059, 1540
PENALOSA, PATRICK..... 1016, 1017
PENT, MICHELLE. 1715
PEOPLE ASSISTING THE HOMELESS. 1937
PERENS, ELLIOT..... 1514
PERESS, LILIA..... 459, 1336
PEREZ, ANGEL. 1038
PEREZ, PERLITA. 98, 460
PERKINS, RACHEL..... 346
PERLMAN, TAMARA..... 1179
PERREAULT, MARK. 1059, 1540, 1541
PERRY, ARTHUR..... 1838
PERRY, KATHERINE. 390
PERTL, URSULA..... 760
PETERSEN, KATE. 1779
PETERSON, JONATHAN.1023, 1024, 1447
PETTUS, JEREMY. 963
PHADKE, OMKAR..... 1149, 1519
PHAM, BETTY. 1003, 1403
PHAM, LILY..... 777, 862, 1180, 1318
PHAM, MARTIN. 773, 1104, 1197, 1628
PHAM, NINA..... 1794
PHAM, QUYNH..... 107, 108
PHAM, TONY. 1902
PHAN, TIFFANI. 555
PHATAK, SONAL..... 964, 1329, 1330
PHILIS-TSIMIKAS, ATHENA. 425
PHILLIPS, COTI. 1227
PHILLIPS, KATHERINE. 765
PHREANER, NICHOLAS. 918, 1234
PHUNG, AIVI. 612, 613, 1541
PHUNG, RICHARD N V..... 1903
PIERCE, HEATHER..... 1527
PIEROS, JANELLE..... 98, 99
PINTO, ANITA..... 195
PIRTLE, KEYSHONE..... 816
PISINGER, PATRICIA..... 99
PITTMAN, LILIANA. 686, 826
PLANTE, CHARLES..... 84
PLASCENCIA, CINDY. 1780
PLUCINIK, STANLEY. 1795
POAST, JENNIFER..... 710, 711
POGGI, SARA. 1541, 1542
POHLEN, MICHAEL.1081, 1082, 1588, 1589
POLESKY, ANDREA. 109, 1665
POLICH, MICHELLE..... 1528
POLK, DAVID. 1344
POLLEMA, TRAVIS..... 1112, 1156
POLLEY, SHANNON..... 614, 1661
PONCE, SONIA. 682, 683
PONIACHIK, SAMUEL..... 653, 654
PONS, MAURICIO. 187, 188
POOLE, DAVID..... 1528
PORTO MADURSKI, KRISTINE.729, 730
POSADAS, EMERITO.662, 663, 664, 1660
POTENZA, BRUCE..... 1097, 1618
POTOK, OLIVIA..... 986
POUNTNEY, MARLENE.658, 659, 660
POUSTI, BOBAK. 1200, 1201
POUSTI, SHEIVA..... 1903
POWAY ADULT DAY HEALTH CARE CENTER. 1702
POWELL, STEPHANIE. 589
PRABHU, SUJATA.1788, 1823, 1858, 1876, 1903
PRASAD, AMITHA..... 1715
PRATT, STEVEN..... 1839
PRESKILL, CATALINA..... 589
PRESTERA, TORY..... 1910
PRIEST, VIVIAN..... 1542
PRINCE, RENEE..... 1557, 1762
PRITZKER, JOELY. 1177, 1678
PROHASKA, THOMAS..... 1234
PROMER, KATHERINE. 705, 706
PROPST, TOBE..... 460
PUIG LLANO, MANUEL. 1024, 1447
PUTRUS, RAMIZ..... 160, 161
PYLE, ALEXANDRA. 1542

Q

QAYOUMI, WALI.1008, 1009, 1416, 1417, 1727, 1762
QENDRO, ISABELLA. 1436

QIAN, ZHEN. 849, 876, 1139, 1463
QUACH, PHUC. 1859
QUAN, MICHELE GRACE. 887
QUICK, ELISABETH. 133, 134, 614
QUIJANO, GLENN. 1543
QUILALANG, SUSAN. 79, 80
QUINTERO, CAROLYN. 664, 1660
QUINTO, CINDY. 391, 392
QUIROZ, ELISA. 108, 109
QURESHI, SOFIA. 1664
QURESHY, ZOYA. 986, 1365

R

RACKHAM, KELLY. 239, 240
RADOJEVIC, NATASHA. 1558, 1762, 1763
RADY CHILDRENS HOSPITAL SAN DIEGO. 1690
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN. 1946, 1947, 1948, 1949, 1950, 1951, 1952, 1953, 1954, 1955, 1956, 1957, 1958, 1959, 1960, 1961, 1962, 1963, 1964, 1965, 1966, 1967, 1968, 1969, 1970, 1971, 1972, 1973, 1974, 1975, 1976, 1977, 1978, 1979, 1980, 1981, 1982, 1983, 1984, 1985
RAGUVEER, VISHAKA. 461
RAHIMI, NASSRIN. 1683
RAHMAN, AKBAR. 100
RAISSI SHABARI, FARSHAD. 1229
RAJADHYKSHA, SALOMI. 1859
RAJAEI, NILOUFAR. 1273
RAJAIPOUR, NEGIN. 698, 699
RAJARATNAM, AKASH. 665, 666
RAJIV, RENUKA. 896, 1274
RALEIGH, DEBORAH. 932, 1274
RALL, EMILY. 614, 615
RAMAMOORTHY, SONIA. 1096, 1617
RAMERS, CHRISTIAN. 518
RAMGREN, AILEEN. 351
RAMIREZ SANCHEZ, CLAUDIA. 711, 980, 1356, 1665
RAMIREZ, ALFREDO. 1113
RAMIREZ, NICOLE. 939, 1293
RAMNATH, VENKTESH. 830
RAMOLIA, ANIKA. 1790
RAMOS, ELENA. 1195
RAMOS, JACQUELYN. 823
RAMSIS, MATTHEUS. 832, 1234
RANA, DEBORAH. 293
RANADIVE, SAYALI. 851, 881, 1147, 1193, 1503
RANASURIYA, DUNISHA. 1144, 1494
RANDLE, CARRIE. 1274
RAO, APARNA. 1149, 1518
RAO, SOUMYA. 1205
RAO, USHA. 215, 216
RASCHKE, ROBIN. 852, 1148, 1194, 1514
RASHCOVSKY SCHIFF, KARIN. 216
RASMUSSEN, DALE. 615
RAYTA, NICOLE. 1177
READ, TRENTON. 799, 886, 1205
REAL, MARIA. 145, 268
REDDY, ARJUN. 173
REDDY, DANA. 634, 635
REDDY, NAVYA. 862
REDDY, REDDIWANDLA. 1116
REDDY, SMITHA. 1206
REEVES, JAMES. 1624
REEVES, RYAN. 996, 1384
REGEV, SHANEE. 146
REID, EMILY. 146, 147, 268, 269, 392
REIFENBERGER, JODY. 354
REIMERS, REBECCA. 783, 866, 1119, 1131, 1132, 1181, 1345, 1346, 1392, 1393
REINEKE, ANKE. 1558, 1763
RESNIKOFF, PAMELA. 519
REVELES, DIANA. 134
REYNOSO, ALFONSO. 85
RHEE, KYUNG. 1528
RHYNER, GINA. 1294
RIBEIRO CALDAS DOMINGUES, ISABEL. 1763
RICE, ELIZABETH. 767
RICHARD, MARLA. 1727, 1764
RICHARDS, KRISINDA. 1177
RICHARDSON, ALVIE. 784, 839, 1119, 1182, 1393
RICHARDSON, ANGELIQUE. 976
RICHARDSON, DANIELLE. 280, 281
RICHARDSON, HENRY. 794, 882, 1194, 1531
RICHARDSON, JULIA. 791
RICKERTS, MATTHEW. 1610
RICKMAN, CHRISTOPHER. 1082, 1589
RIDGE, NEAL. 462, 1336
RIEDL, MARC. 1209
RIEGO, SUZANNE. 1274
RIES, DAVID. 1529
RIFKIN, DENA. 1004, 1005, 1406
RIGGINS, NINA. 1417
RILEY, JEREN. 392, 393, 1275
RIOS, SIERRA. 1715
RIVADENEYRA, KELLY. 1734, 1776
RIVAS, RENEE. 1017, 1436
RIVERA, KEVIN JOHN. 1708, 1764, 1765
RIVERA, MELISSA. 1716
RIVERA, TANIA. 519
ROBERTS, AUDREY. 1059, 1060, 1543
ROBERTS, CALE. 1495
ROBERTS, KENDALL. 248
ROBERTS, POMAI. 281, 1160
ROBINSON, ADAM. 1082, 1590
ROBINSON, COLE. 859
ROBINSON, DAISY. 243, 894
ROBINSON, DEAN. 207
ROCHE, CHELSEA. 932
RODARTE, GABRIEL. 216, 217
RODENMEYER, EVE. 1275
RODRIGUES, ANNETTE. 854, 885, 1153, 1196, 1543
RODRIGUEZ JEREZ, ROBERTO. 1667
RODRIGUEZ MELENDEZ, DAVIS. 1776
RODRIGUEZ, ALDO. 195, 724, 1667
RODRIGUEZ, CASSANDRA. 138
RODRIGUEZ, JAVIER. 589, 590
RODRIGUEZ, SEAN. 462
RODRIGUEZ-MINETTE, JESSICA. 826, 1686
ROGERS, MATTHEW. 70, 766
ROGERS, TANYA. 393
ROJAS, RICHARD. 415
ROJAS, SARAH. 699
ROMA, ANDRES. 1047, 1470
ROMANS, AURORA. 1735

M.مؤشر مقدمي الرعاية الصحية الأولية

ROMERO, CAMILA.....627, 628, 1550
ROMO, JORGE.....1060
RONAN, KEVIN.....346, 347, 760, 761
ROSA, ADAM.....1881
ROSADO, IVAN.....1336
ROSE, PATRICIA.....740
ROSENBLATT, EUGENE.....100
ROSENBLATT, SHERILYN.....199
ROSS, COLLIN.....730
ROSS, CRYSTAL.....80, 1275, 1276
ROTMAN, YONATAN. 1083, 1590, 1591
ROUEL, WADI.....174, 175, 288, 520
ROURKE, KYLE.....1319
ROWHANI, NAGHMEH. 128, 129, 794
ROZELL, JOSEPH.....1083, 1591
ROZO, JOSE.....1276
RUBENSTEIN, STUART.....591
RUBENZIK, TAMARA.837, 978, 1352, 1681
RUBIO, HALEY.....1661
RUDD, CHRISTOPHER.....1092, 1610
RUDOLF, FRANCES.....828, 955, 1319
RUELAS, ROBERTO.....725
RUNGVIVATJARUS, TIRANUN. 1529
RUSSELL, SAMUEL.....1192, 1495
RUSSO, KRISTA.....673, 674
RYAN, DANA.....245
RYAN, KYLE.....883, 1152, 1195, 1531
RYAN, RHIANNON.....1337
RYU, JULIE.....1518

S

SAADA, HASSAN.....835
SABHA, MAHMOUD.....955, 1319
SABIN, NANCY.393, 394, 395, 1276, 1277
SACHS, MELISSA.....1731, 1765
SACKS, BRENT.....939, 1294
SADAT, SAYED.....1083, 1592
SADDA, REEM.....1710
SADLER, CHARLOTTE.....1319
SAHA, SRISHTI.....987, 1365
SAHMS, TIMOTHY.....725, 726
SAID, MENA.....1122
SAIDRO, LUZVIMINDA.....71
SAJTI, ENIKO.....1003, 1404
SALAMANCA, OMAR.....1180
SALAS GAERLAN, JESSICA.....1207
SALAZAR, CLAUDIA.674, 675, 676, 677, 1196
SALAZAR, JUANITA.....129
SALEH, FAREED.....1496
SALEM, RAMSEY.....161, 162
SALES, JAN ERIC.....632
SALINAS, NIECEL.....933, 1277
SALO, STEPHANIE.....1559, 1766
SAMHA, LEEN.....955, 1320
SAMI, REMAN.....108
SAMPATH, SRIVIDYA.....591
SAMUEL, MICHAEL.....1812, 1823, 1859
SAN DIEGO AMERICAN INDIAN HEALTH CENTER.....50
SAN DIEGO AMERICAN INDIAN HEALTH CENTER, ...488
SAN DIEGO FAMILY CARE.....49, 1937
SAN DIEGO FAMILY CARE, ...488, 489
SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE.....1703
SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE.....1916, 1919
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE.....27
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE, ...63
SAN YSIDRO HEALTH CHC - OCEAN VIEW.....46
SAN YSIDRO HEALTH CHC - OCEAN VIEW, ...489
SAN YSIDRO HEALTH CHULA VISTA. 29
SAN YSIDRO HEALTH CHULA VISTA, ...106, 107
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED.....51
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED, ...489
SAN YSIDRO HEALTH EL CAJON. ..30
SAN YSIDRO HEALTH EL CAJON, .166
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE.....32
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE, ...222, 223
SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE.....36
SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE, ...246, 247
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR.....55
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, ...703
SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE.....28
SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE, ...71
SAN YSIDRO HEALTH NATIONAL CITY.....38
SAN YSIDRO HEALTH NATIONAL CITY, ...286
SAN YSIDRO HEALTH PARADISE HILLS.....37
SAN YSIDRO HEALTH PARADISE HILLS, ...286
SAN YSIDRO HEALTH PRECISION PARK.....47
SAN YSIDRO HEALTH PRECISION PARK, ...490
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER.....54
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, ...703, 704
SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE.....55
SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE, ...734, 735
SAN YSIDRO HEALTH SOUTH BAY.38
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS.....28
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS, ...107
SAN YSIDRO HEALTH SOUTH BAY, ...286, 287
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS.....54
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS, ...704

M.فهرس الرعاية الأولية

SANACORA, RACHEL.... 1178, 1277, 1278
SANCHEZ, AMBER..... 1005
SANCHEZ, MICHAEL. 1060
SANCHEZ, MYRNA. 687
SANDERS, JESSICA. 58, 59
SANDHU, BASANT. 217
SANDIFORD, PATRICK. 956, 1320
SANDLER, BRYAN. 1624, 1625
SANDOC, EMILY. 1903, 1904
SANTANGELO, JOANNE.395, 396, 397, 1278
SANTIAGO, AMANDA..... 1178
SANTIAGO, ROXANE..... 129
SANTIAGO-LASTRA, YAHIR.1649, 1650
SANTORELLI, JARRETT. 1099, 1625
SANTOS CAVAIOLA, TRICIA. 964, 1330
SAPRA, SONIA.116, 184, 260, 261, 556, 557, 558, 746
SASSIC, JESSICA..... 520, 521
SATTERWHITE, MAURINE.397, 398, 1279
SAUER, CHARLES.841, 867, 1004, 1202, 1404
SAUNDERS, DENISE..... 80, 81
SAURE, MELISSA. 1294
SAVA HOME. 1699
SAVILLE, EDITH. 399
SAWHNEY, NAVINDER..... 865
SAWYER, CAROLYN. 1529, 1766
SCHELLIE, SCOTT. 616
SCHELLINGER, KRISTON.1559, 1560, 1767
SCHIEDERMAYER, BENJAMIN.1095, 1614
SCHLOSSER, TARA. 1767
SCHMIDT, BRYAN. 632
SCHMITT, EVA. 1543
SCHNEEBERGER, ANDRES.1728, 1768
SCHNEIDER, SARAH. 135, 623, 624
SCHNEIDER-MUNOZ, MARGARITA. 711, 712
SCHNEIR, AARON..... 956, 1320, 1321
SCHNICKEL, GABRIEL. 1645
SCHROEDER, JENNIFER. 1544
SCHROTER, STEPHANIE. 1145, 1496
SCHULTE, JESSICA. 1009
SCHULTZ, HEATHER. .1084, 1592, 1593
SCHULTZ, JAMES. 217, 218, 751
SCHULZ, STEFAN. 1544
SCHUMAKER, EDWARD.162, 163, 282, 463
SCHWAB, GARY. 1450
SCHWARZ, KATHLEEN. 1506
SCHWENDEMANN, WADE.1120, 1182, 1394
SCOTT, JEFFREY..... 1804, 1860, 1876
SCOTT, KELLY. 399, 400
SCOTT, LAGINA. 1337
SCOTT, RYLEE. 463
SCOTT, TIFFANY. 940, 1294, 1295
SCOTT-WYARD, PHOEBE. 1152, 1531
SCOVILL, ALEXANDRA. 791, 1795
SCRIPPS GREEN HOSPITAL..... 1690
SCRIPPS MEMORIAL HOSPITAL. .1691
SCRIPPS MEMORIAL HOSPITAL ENCINITAS. 1691
SCRIPPS MERCY HOSPITAL..... 1691
SCRIPPS MERCY HOSPITAL CHULA VISTA. 1691
SEARLEMAN, ADAM. 1084, 1593
SEARS-WILEY, ELIZABETH. 1279
SEAWELL, CHRISTINE. 1180
SEBASKY, MEGHAN..... 987, 1366
SEBIANE, MARIA. 666, 667, 668
SEBRING, JAN..... 400, 401
SEBSO, JODI. 591, 592
SEDGHI, SOUDABEH. 1109, 1635
SEFA-BOAKYE, KOFI. 116, 720
SEGAL, LAUREN. 957, 1321
SEITZ, GRETCHEN. 1241
SELBY, BLAKE. 1279, 1280
SELECT SPECIALTY HOSPITAL SAN DIEGO. 1692
SELF, MICHAEL. 1321
SELTZER, JUSTIN. 957, 958, 1321
SERENE HEALTH.1923, 1924, 1939, 1940
SERENO, EMILY. 767, 774, 1228
SERHAN, STEPHANIE. 1060, 1545
SERIO, TAYLOR. 1768
SERPAS, SHAILA. 101
SERRA, NATALIE..... 1295
SHABAIK, AHMED. 1047, 1470
SHAH, NIYATI..... 836
SHAH, SHAILJA. 970, 1344
SHAH, SONA. 789
SHAHIDYAZDANI, TINA. 726, 727
SHAHTAJI, ALAN. 700
SHAMSINEJAD BABAKI, ARASH. 521
SHANNON, KELLI. 1394
SHAPIRO, HILARY. 918, 1234, 1235
SHAPIRO, RACHEL. 1545
SHARMA, ANITA. 1148, 1507
SHARP CHULA VISTA MED CTR. .1692
SHARP CORONADO HOSP AND HEALTHCARE CTR. 1692
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS. 1692
SHARP MEMORIAL HOSPITAL. 1693
SHARPE, NORMA..... 64, 65, 72, 231
SHASTA HOME. 1696
SHAUF, JOANN. 1668
SHAW, BLAKE. 565, 566
SHAW, SUSANNA. 911, 1221
SHEIKH, ZARA. 464
SHEIKH-MOHAMED, HALA. 175
SHELTON, ALYSSA. 1439
SHEN, JIA. 1235
SHENOY, ASHVIN. 593
SHERER, KIMBERLY.794, 880, 1192, 1496
SHEREV, DIMITRI. ...782, 819, 1116, 1236
SHERMAN HEIGHTS FAMILY HLTH CTRS INC. 45
SHERMAN HEIGHTS FAMILY HLTH CTRS INC, ... 490
SHETH, HASMUKH. 130, 593
SHETH, SARIKA..... 1145, 1497
SHI, RUJING. 521, 522
SHI, VERONICA..... 1304
SHIAU, NANCY..... 593
SHIEH, ALVIN. 891
SHIELDS, SEBASTIAN. 1708
SHIH, JERRY..... 1009, 1418

M.مؤشر مقدمي الرعاية الصحية الأولية

SHIMIZU, KELSIE. 771
SHIRAKI, JEAN. 465
SHISHLOV, KIRILL. 958, 1322
SHMARIAHU, SHELLY. 1605
SHMERLING, ALISON. 1337, 1338
SHORT, ABIADE. 117
SHU, I WEI. 1768
SHULKIN, MITCHELL. 1904
SHUMILAK, KAILI. 465
SHWAIKI, OMAR. 1084, 1593, 1594
SIETSMA, ALEXANDRA. 1280, 1551
SIEVERING, DENISE. 1089, 1605
SILVA ENCISO, JORGE.902, 1208, 1236
SILVA SEPULVEDA, JOSE.765, 850, 851, 877, 1141, 1479
SIMEONE, DIANE. 1099
SIMMONS IV, ROBERT. 1731
SINGH, PRABHLEEN. 1006, 1406
SINGH, PUJA. 1147, 1503
SIRIPHAND, CHRISTOPHER.987, 1366
SKAF, AYHAM. 120, 188, 720, 721
SKALSKY, ANDREW. 1152, 1531
SKAY, RICHARD. 1910
SKINNER, NICOLE. 1093, 1611
SKOPEK, TAM. 1678, 1679
SLATER, JERRY. 1085, 1594
SLOANE, CHRISTIAN. 958, 1322
SMITH, CASEY. 958, 959, 1322, 1323
SMITH, CHELSEY. 988, 1366
SMITH, DOUGLAS. 730
SMITH, KELLI. 894, 1125
SMITH, TREVOR. 1061, 1545
SMOOT, CHARLES. 466, 467
SNOOK, BRIAN. 282
SNOW, ERICA. 911, 1221, 1222
SNYDER, BRIAN. 959, 1323
SNYDER, CHRISTOPHER. 467
SNYDER, MICHELLE. 1127
SOCHA, TRACI. 668
SOLIS, KEVIN. 1795, 1913
SONG, CAROL. 1671
SONG, JOYCE. 229
SONG, WEI. 1471
SOPHY, ELIZABETH. 468
SORIA JIMENEZ, CESAR. 997
SORIA LOPEZ, JOSE. 787, 821, 1659
SORIA, CLAIRE. 911, 1222
SOROKIN, LISA. 1019
SOSA, DAVID. 150, 151, 416
SOTO MAYA, ANAYELI. 861
SOUDER, CHRISTOPHER. 1145, 1497
SOUTHBAY URGENT CARE INC. .1985
SOZANSKI, JESSE. 1562
SPAK, DARYL. 778
SPARKS, CHELSEA. 1085, 1595
SPARKS, TODD. 808, 809, 900, 1170
SPENCE, JAMIE. 677, 678
SPENGLER, NATHAN.1085, 1086, 1595, 1596
SPEZIALE, MARK. 786, 1405
SPITZER, MARSHA. 594, 595
SREJIC, UNA. 1222
SRIDHAR, SUNITA. 1510
SRILASAK, MICHELE. 835, 933, 1679
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER. 46
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, ...491
STABEN, REBECCA.117, 118, 184, 185, 261, 558, 559, 560, 746
STAHL, KEVIN. 810
STALEY, MICHAELA. 700
STALLINGS, ANDREA. 1546
STEINBERG, LEONARD. 1479
STENSMAN, LARS. 63, 64
STEPENOSKY, JAMES. 1086, 1596
STEPHENS, LAURA. 1471
STEPHENSON, SAMUEL. 1100, 1626
STERN, MARLEIGH. 1305
STEVENSON, REHEIA. 933, 1127
STEWART, TYLER. 976
STIPHO, SALLY. 492, 493
STOJANOVSKA, JOVANA. 893
STONE, CALVIN. 1716
STONES, RACHEL. 283
STOVER, LAURIE. 1529
STRAKA, CHRISTOPHER. 1566
STRAZICICH, KARLA. 229
SUAREZ, ROBERTO. 1769
SUBRAMANIAN, RAMA. 596
SUDHAKAR, DEEPTHI.782, 783, 819, 820, 865, 1384, 1385, 1656, 1657
SUGGS, SARAH. 811, 900, 901, 1170, 1171
SULEIMAN-QAFITI, KHAWLA. 596
SULLIVAN, ELISSA. 727
SULLIVAN, THOMAS. 1110, 1635
SUMMERS-DAY, COURTNEY.468, 897, 1338
SUN, ALEX. 1086, 1087, 1596, 1597
SUNA-SITTO, MOHEEN. 731
SURI, RAJAT. 1154, 1688
SUSAN PARHAM HOUSING CORPORATION. 1699
SUTHERLAND, ANNA. 1305
SUTHERLAND, PAIGE.1708, 1709, 1728, 1769
SUTTON, BRIAN. 854
SUYDAM, STEVEN. 911, 1223
SWAN, MELANIE. 147
SWANSON, BRIANNA. 1280
SWARTZ, ERIN. 1281
SWARTZ, JOHN. 101, 102, 469
SWEAT, MARIE. 1418
SWEENEY, DANIEL. 828
SWEENEY, NATHALY. 867, 1405
SWEET, JASON. 1597
SWEET, PATRICK. 701
SWEIGERT, JAMIE. 1769
SWORDS, KELLY. 1650
SYED-UDDIN, SUMIYAH. 1128

T

TA, MINI. 1910
TA, TRANG. 1904
TABAREZ, NORMA. 827
TADDONIO, MICHAEL. 1087, 1598
TADROS, ANTHONY. 1087, 1599
TAFRESHI, GILDA. 531
TAGHIZADEH, BEHZAD. 1117
TAGHIZADEH, MAJID. 417, 418
TAHRIRI, BAHAREH. 679, 680
TAI, KUANGKAI. 351
TAING, JENNIFER. 1281
TALAVERA, GREGORY. 102, 701, 702
TALBOT, ADRIANNE. 1281

M.فهرس الرعاية الأولية

TAM, MAY. 1905
TAMAS, VANESSA. 1497
TAMAYO, MAITHE. 596, 597
TAN, CARMELA. 1061, 1546
TAN, LO FU. 702
TANAKA, HIDEAKI.828, 959, 1323, 1324
TANAKA, MARY. 76
TANG, ANDREW. 1146, 1498
TANG, MICHAEL. 980
TANGELO. 1916
TANTISIRA, KELAN. 1519
TANTOD, KULIN.....219
TAPIA, ASHLEY. 1779
TARLE, STEPHANIE.1066, 1560, 1728, 1770
TARVER, LESLIE. 1728
TAUB, PAM..... 919, 997
TAVASSOLI, SARA.1788, 1804, 1812, 1824, 1839, 1860, 1876, 1905
TAYLOR, CHRISTOPHER.....315, 316
TAYLOR, DAVID.....988, 1366
TAYLOR, KAYLA. 401, 402
TAYLOR, TASHA. 727, 728
TCHAKMAKJIAN, LEVON. 176
TECOMA, EVELYN. 1010, 1419
TEETER-WITT, ALYSSA. 887, 1716
TEJEDA, FRANCISCO.....704
TELLECHEA-SANCHEZ, SELMIRA. 230
TERRY, AMANDA.....205
TESSIER, ADLA..... 522
TEW, JOHN.....1829
THACH, QUEEN. 791, 822, 1165
THACH, TERILYN.....1824
THACKABERRY, JESSICA.....1770
THAI, AMANDA. 1911
THAI, JUSTIN..... 469, 470
THAN, CINDY.....1790
THANGARAJAH, HARIHARAN.766, 1155, 1638, 1639
THAPER, MOHINDERPAL. 1202
THAYER, KARISA.....1161
THOMAS, KELSEY. 1066, 1729
THOMAS, ROBERT. 1367
THOMAS, THEA. 1062, 1547
THOMAS, ZACHARY..... 470, 471
THOMPSON, CHERYL. 219
THOMPSON, COURTNEY..... 1282
THOMPSON, KYLE.857, 892, 1156, 1199, 1639
THOMSON, SAMANTHA.....1018, 1436
TILLMAN, SYLVIA. 1860, 1905
TILTON, PETER.....1770
TITANIUM HEALTHCARE.....1920, 1921
TO, BRITTANY.1788, 1804, 1824, 1839, 1861, 1877, 1906
TO, TUAN. 1560, 1561, 1770, 1771
TOCCO, JESSICA..... 940, 1295
TODD, MIKAYLA.59, 207, 402, 403, 733
TODD, SARAH. 880, 1193, 1498
TOLBA, KAMEI. 205
TOLEDO-NADER, CAROLL. 102, 103
TOLMIE, SIMONE. 409
TOMASZEWSKI, CHRISTIAN.959, 960, 1324, 1325
TOMASZEWSKI, DEBRA. 616, 617
TOMLIN, JEFFREY. 1629
TON-NU, MY LINH.1788, 1805, 1812, 1824, 1840, 1861, 1862, 1877, 1878, 1906
TONG, KIM. 933, 1282
TONNU, ANH.... 1805, 1840, 1862, 1906
TORRES BARBA, DAVID. 998, 1385
TORRES, ERICK. 960, 1325
TORRES, MICHAEL. 1171
TORRES, RANDALL..... 765, 1705
TOTH, JESSICA.....253
TOUBIA, ELIAS. 1796, 1878, 1913
TOVAR, NICOLE. 633
TRAN, ALEXANDER. 1825, 1907
TRAN, HAN. 940, 1296
TRAN, HAO. 902, 1367
TRAN, HEATHER..... 1124
TRAN, KELLY. 403
TRAN, KIM. 1160, 1161
TRAN, LINH.830, 994, 1129, 1130, 1378, 1687
TRAN, MICHAEL..... 1911
TRAN, THAO.....1914
TRAN, THERESA.....1146, 1499
TRAN, TONNIA. 471, 472
TRAN, TU-UYEN. 748, 749
TRAN, UYEN-THAO. 471, 472
TRANG, CHAU. 1907
TREJO, ANA.....934, 1282
TREJO, RAUL. 103
TRESSLAR, PERI. 777
TREUNER, JULIE. 617
TRI CITY MEDICAL CTR. 1693
TRIMM, CASSIDY. 1093
TRINGALE, KATHRYN. 1566
TRINH, RACHELLE. 1796
TRIPPITELLI, CAROL. 1782
TRIVEDI, SURAJ. 912, 1223
TROYER, EMILY..... 1709, 1771, 1772
TRUECARE. 28, 42, 44, 53, 54
TRUECARE, .74, 331, 352, 649, 650, 651
TRUJILLO, DALE.....934
TRUJILLO, JENNIFER..... 118, 560
TRUJILLO, MIGUEL..... 731
TRUONG, NHA..... 472
TRUONG, VENNES.....418
TSAI, MATTHEW. 970, 971, 1345
TSUCHIYA, KIMIKO. 473
TSUDA, PAIGE. 912, 1223
TSUI, NANCY.....1862
TU, BEVERLY. 1863
TU, CHARLES. 1907, 1908
TU, MONIQUE. 1224
TUCKER, LANIKA. 935, 1283
TUEROS, VICTORIA. 403, 404
TULLY, JEFFREY. 912, 1224
TUNG, VIVIAN. 249
TURNER, ERIC. 199, 200, 749
TURNER, SHEREENA..... 200, 618
TURRILL, MCKENNA. 1863
TWAMLEY, ELIZABETH..... 1561, 1772
TZENG, ERIC. 913, 1224

U

U, HOI.....1104, 1629
UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER. 1693
UCSD LA JOLLA JOHN SALLY THORNTON.....1694

UCSD MEDICAL CTR. 1694
UCSD MEDICAL GROUP, ...528
UDOH, EKAETE. 618
ULRICH, STACEY. 1499
UNG, HOAMENG..... 1010, 1419
UNGER, LINDSEY. 1095, 1614
UNTERBERG, STEPHEN. 1650, 1651
UPASANI, VIDYADHAR.1155, 1198, 1635, 1636
UREY, MARCUS. 903, 1385
URIBE-BRUCE, LILIANA..... 523
UTZ, JACK. 702, 703
UY, ASHLEY. 151
UY, CARMELITA.....293

v

VAHABZADEH-HAGH, ANDREW. 1038, 1039, 1463, 1464
VAHDAT, NOUSHIN...1087, 1599, 1600
VAIDYA, KAMALA.794, 880, 881, 1193, 1499
VAIL, DANIEL. 1024, 1448
VAISMAN, SAMANTHA..... 811, 901
VAKILIAN, SIAVOSH.....888, 1567, 1600
VALDEZ, KRYSTAL ANGELI. ... 523, 524
VALENCIA, MARILES. 130, 294
VALENZUELA, TRICIA..... 473
VALLIDO, CHRISTIAN. 1772
VALSAINT, JOSIANE. 764
VAN DYKE, JASON. 633
VAN HOLLEBEKE, RACHEL. 62
VAN HOOSE, MARC. 1908
VAN PRATT LEVIN, BENJAMIN. ..1338
VAN WOY, LAUREN. 1500
VANDEWIELE, EMILY. 1611
VANE, JACKSON. 1500
VANETSKY, GARY. 855
VARGAS TRUJILLO, MARCELA.1151, 1503
VARGAS, BRIANDA. 764
VARGAS, CHRISTOPHER. 796, 797
VARGAS, ROBERT. 619
VARGAS, YASHIA. 1772, 1773
VARON, SHIRA. 1437
VASQUEZ, BENJAMIN.1093, 1094, 1611
VAUGHN, GABRIELLE. 1479
VAVINSKAYA, VERA. 1048, 1471
VAYNGORTIN, TATYANA. 1500
VAZQUEZ-ERLBECK, MARTHA. 687
VCC DURIAN. 56, 57
VCC DURIAN, ...756, 757
VEGA, CAROLINA..... 1146, 1501
VEGA, TERESA. 81, 404
VELASQUEZ, SHARON. .. 103, 104, 283
VELAZQUEZ CAMARENA, MARIA. .110
VENNAM, VAMSI KRISHNA. 1717
VENTRO, GEORGE. 1097, 1618
VERCHER, ROSHON. 1717
VERDUZCO GONZALEZ, AURORA. 147, 148, 269
VERISSIMO, TAYLOR. 811, 812, 901
VERRET, ERIC. 1825
VETTICADEN, SANTOSH. 224, 225
VIA RIO HOUSE. 1695
VIBAL-POASTER, MARIA KHRISTINA. 1283
VIDAL, MONICA. 330, 331
VIDAURRAZAGA, MONICA. 524
VIETEN, CASSANDRA. 1561, 1773
VILLA, ANGELICA. 1796
VILLALOBOS, REBECA.....404, 405
VILLANUEVA DE GUTIE, BERENICE. 148, 270
VILLANUEVA, GIOVANNI.812, 901, 1171
VINCENT, BERLIN. 1296
VINH, JOHN.1805, 1813, 1840, 1863, 1878
VISTA COMMUNITY CLINIC.33, 34, 35, 39, 40, 41, 42, 1943
VISTA COMMUNITY CLINIC GRAPEVINE..... 57
VISTA COMMUNITY CLINIC GRAPEVINE, ...757
VISTA COMMUNITY CLINIC HORNE STREET..... 42, 43
VISTA COMMUNITY CLINIC HORNE STREET, ... 333, 334
VISTA COMMUNITY CLINIC PIER VIEW WAY. 43
VISTA COMMUNITY CLINIC PIER VIEW WAY, ...334, 335
VISTA COMMUNITY CLINIC, .241, 242, 332, 333
VISTA HOUSE. 1699
VO, ANDREW. 1026, 1027, 1451
VO, ANDREW MINH. ..1840, 1841, 1908
VO, PHU LUONG. 1339
VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION.....1940
VOSSLER, JOHN. 1645
VU, PETER. 976, 1350
VU, WENDY. 243

w

WAGNER, GABRIEL. 1367
WAGONER, KENYADA.....1719
WAHLIN, TAMARA.1062, 1063, 1547, 1548
WAKEFIELD, CHANTAL.940, 1296, 1297
WALDRUP, LA RHONDA. 861, 1283
WALKER, ALEXANDRA. 1178
WALKER, JULIE. 1611
WALLACE, STEPHANIE.....1683
WALSH, EMILY.....1719, 1773
WALSH, JOHN. 885
WANG, ANGELA. 988, 1367, 1368
WANG, DEHUA. 1472
WANG, HUAN YOU. 976, 977, 1351
WANG, LAWRENCE...1088, 1600, 1601
WANG, MICHELLE. 913
WANG, REGINA. 474
WANG, VINCENT. 1501
WANG, XINYU. 1209
WANG, YVETTE. 1501
WANG-GIUFFRE, ELIZABETH. 1479
WARDI, GABRIEL..... 831, 960, 1325
WASHINGTON, KRYSTAL. 765
WASSON, MINA. 598
WASTILA, LISA. 524, 525
WATERS, ELIZABETH..... 598
WATSON, DEBORAH.1039, 1040, 1464, 1465
WATTANAMANO, PORNTHEP.525, 526
WATTS, ELI. 526

M.فهرس الرعاية الأولية

WAYMENT, ANDREW.....961, 1326
WEATHERLY, JACOB..... 598
WEAVER, AMANDA. 1711
WEAVER, APRIL. 761
WEBB, SHANNON. 1548
WEBER, SARA. 1776
WEBSTER, LUKE. 1368
WEICKERT, MARIA. 405
WEIMER, BRYANA. 1284, 1285
WEIR, JACQUELINE. ..1063, 1548, 1549
WEISSBROD, PHILIP. ..1041, 1465, 1466
WEISSMAN, CORY. 1774
WELLS, TODD. 1208
WELSH, RAYMOND. 1088, 1601
WEN, AKI. 104
WERNER, R AARON. 1806
WERNER, REX. 1806
WEST, JULIE. 1132, 1203, 1406
WESTERMANN, MELISSA.784, 1183, 1395, 1396
WESTERN ADULT DAY HEALTH CARE CENTER. 1701
WETTERSTEN, NICHOLAS.903, 998, 1130, 1386
WHARRAM, JENNIFER. 1684
WHEELER, KIM. 824, 1711
WHITE, KYLE. 1123
WHITLEY, NICHOLAS. 104, 105
WIENER, GREGORY. 779
WIETZKE, MATTHEW. 1286
WIJAYARATNE, IMANIE. 800, 1709
WILAND, WINONA. 771
WILCOX, WENONAH. 775
WILKIN, TIMOTHY. 1356
WILKINS, MARJORIE. 825
WILKINSON, MICHAEL. 919, 1237
WILLIAMS, BREAHNA..... 149, 270, 407
WILLIAMS, JESSICA. 636
WILLIAMS, JINA. 754
WILLIAMS, MATTHEW. 1141, 1480
WILLIAMS, STACY. 1094, 1612
WILLIAMS, TAKISHA.81, 82, 149, 253, 254, 405, 406, 738
WILLMS, HANNAH. 1612
WINESBURG, JENNIFER. 1163
WINKLER, GARRET. 961
WINTERS, KATHRYN. 978, 1352
WISHNEK, HANNAH. 1729
WITCZAK, IZABELA.651, 652, 653, 1655
WOELKERS, DOUGLAS. 839, 1000
WOLF, CELIA. 407
WOLF, RICHARD. 840, 1001, 1396
WOLFE, AMANDA. 1199
WON, ERIC. 1510
WONG, GORDON. 1908
WONG, HENRY. 943, 1305
WONG, IAN. 599
WONG, JUSTIN. 989, 1368
WONG, RICHARD. 1044, 1468
WONG, VICTOR. 1511
WONG, YOLANDA. 599
WOO, ANDY. 1286
WOO, JASON. 1651
WOODIN, KAREN. 836, 862, 941
WOOLSEY, EMILY. 896, 1286
WRIGHT, KIMBERLY. 1200
WU, EVA. 1879
WU, JENNIFER. 474
WU, MICHELLE. 1774
WU, VICTORIA. 1010, 1419
WYLIE, BLAKE. 63, 246, 247

X

XUE, JAY. 1643

Y

YADLAPATI, RENA. 989
YAGUDAYEVA, RAISA. 1774
YAMADA, KENTARO. 1448
YAMANE, MAYA.847, 873, 1136, 1187, 1448, 1449
YAN, CAROL. 1042, 1043, 1466, 1467
YANG, JENNIFER. 1420
YANG, JENNY. 989, 1369
YAO, CATHERINE. 131
YAPHOCKUN, KAREN KIM. 1502
YCASAS, EMILY. 1654, 1679
YEANG, CALVIN. 1238
YELLEN, LAURENCE. 1118
YELON, JAY. 1625
YEO, ALEXANDRIA. 835, 935
YIDI, DIANA. 1774
YIN, JANE. 1088, 1602
YOO, RAPHAEL. 1602, 1603
YOON, RYAN. 105
YOON, TAE HYUN. 176
YOU, ALAN. 961, 1326
YOUNAN, LAWRENCE. 913, 1224
YOUNG, ALLA. 1798, 1864
YOUNG, JENNIFER. 73, 74
YOUNG, JOCELYN. 852, 1507
YOUNG, MAILE. 1369
YOUNG-PEN, TONI. 619
YOUNOSZAI, ADEL. 1480
YOUSEF, ANDREW. 567, 568
YOUSSEF, FADY. 971, 1345
YU, AUDRINE. 1094
YU, CAROL. 1027, 1451, 1452, 1841, 1909
YU, ELAINE. 962, 1326
YU, HELENA. 1511
YU, JENNIFER. 1511
YUNG, DORIS. 353, 354
YUNG, STEVEN. 527

Z

ZABLIT, KARIM. 566, 567
ZAERPOOR, DARA. 913, 1225
ZAGE, PETER. 1512
ZAHEER, AARON. 599, 600
ZAHLER, MARVIN. 475
ZAIDI, NOORINA.847, 874, 1789, 1806, 1825, 1841, 1864, 1879, 1909
ZALE, CHELSEA. 1420
ZAMORA, JESUS. 1089, 1603
ZANDER, ASHLEY. 1113
ZANGEN, ROCHELLE. 354
ZARE, SOMAYE. 1048
ZARGAR, SHABNAM. 131
ZATT, DANIELLE. 885
ZAYAS, MARIO. 1775, 1779
ZECHA, RONALD. 208
ZHANG, HAIYAN. 1049
ZHANG, SHERRY. 990, 1369
ZHAO, TAILUN. ..1806, 1813, 1826, 1842
ZHONG, YAN. 1406, 1407
ZHOU, JENNY. 1351

ZIEG, ALAN.119, 185, 262, 561, 562, 563, 564, 747
ZIMBRIC, MICHAEL. 869, 1421
ZINK, IRENE. 475, 476
ZLATAR, ZVINKA.....1067, 1729
ZUBAIR, RAHEEL.....768, 1305
ZUNIGA, ROSA..... 1717
ZVANUT, DONALD.1807, 1813, 1826, 1842, 1865, 1880

عنوان المراسلات:
Blue Shield of California Promise Health
3840 Kilroy Airport Way
Long Beach, CA 90806

خدمة العملاء
(855) 699-5557، من 8 صباحًا حتى 6 مساءً
من الإثنين إلى الجمعة

خدمة TTY لمساعدة ضعاف السمع
711 (California Relay Service من خلال)
من 8 صباحًا حتى 6 مساءً، من الإثنين إلى الجمعة

blueshieldpromise.com

DIR50528-SD-AR 08/2025

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

, -